Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF OHIO	<u> </u>	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself			
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Teray First name L. Middle name Mack Last name and Suffix (Sr., Jr., II, III)	•	LaStacia First name N. Middle name Mack Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.			LaStacia Hightower
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-3345		xxx-xx-8027

Official Form 101

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	■ I have not used any business name or EINs. Business name(s) EINs			
Where you live	16750 Akron Street	If Debtor 2 lives at a different address:			
	Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
	Geauga				
	County	County			
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
	Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)			
	Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Where you live Why you are choosing this district to file for	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Business name(s) Business name(s) Business name(s) Business name(s) Business name(s) Business name or EINs. Business name or EINs.			

Debtor 1 Teray L. Mack Debtor 2 LaStacia N. Mack	Cas

Case number (if known)

Par	t 2: Tell the Court About	Your Bank	cruptcy C	ase				
7.	The chapter of the Bankruptcy Code you are choosing to file under	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	choosing to file under	■ Chapter 7						
		☐ Chap	ter 11					
		☐ Chap	ter 12					
		☐ Chap						
		·						
8.	How you will pay the fee	ab ord	out how yo	ou may pay. Typically attorney is submitting	ck with the clerk's office in your local court for more details burself, you may pay with cash, cashier's check, or money half, your attorney may pay with a credit card or check with			
				y the fee in installme ee in Installments (Off		on, sign and attach the Application for Individuals to Pay		
		□ Ire	equest tha	at my fee be waived	(You may request this option	on only if you are filing for Chapter 7. By law, a judge may,		
		ар	plies to yo	ur family size and you	u are unable to pay the fee i	our income is less than 150% of the official poverty line that n installments). If you choose this option, you must fill out cial Form 103B) and file it with your petition.		
9.	Have you filed for bankruptcy within the last 8 years?	■ No.						
	iast o years:	□ res.	District		When	Coco number		
			District		When	Case number Case number		
			District		When	Case number Case number		
			District		when	Case number		
10.	Are any bankruptcy	■ No						
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.						
			Debtor			Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
11.	Do you rent your	■ No.	Go to	line 12.				
	residence?	☐ Yes.	Has yo	our landlord obtained	an eviction judgment agains	st you?		
				No. Go to line 12.	-			
				Yes. Fill out <i>Initial</i> S this bankruptcy petit		Judgment Against You (Form 101A) and file it as part of		

	tor 1 Teray L. Mack tor 2 LaStacia N. Mack				Case number (if known)			
Par	Report About Any Bu	ısinesses	You Owi	n as a Sole Proprie	or			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	■ No. Go to Part 4.					
					iness			
	A sole proprietorship is a							
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			e of business, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	per, Street, City, Stat	e & ZIP Code			
	it to this petition.		Chec	k the appropriate bo	x to describe your business:			
				Health Care Busir	ness (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))			
				Commodity Broke	r (as defined in 11 U.S.C. § 101(6))			
				None of the above				
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i> debtor?	deadline operation	ou are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set a adlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, st erations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the 1 U.S.C. 1116(1)(B).					
	For a definition of small	■ No.	I am	not filing under Chap	ter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am t		11, but I am NOT a small business debtor according to the definition in the Bankruptcy			
		☐ Yes.	I am	filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Par	4: Report if You Own or	Have Any	/ Hazardo	ous Property or An	y Property That Needs Immediate Attention			
14.	Do you own or have any	■ No.						
	property that poses or is alleged to pose a threat	☐ Yes.						
	of imminent and identifiable hazard to		What is	the hazard?				
	public health or safety? Or do you own any							
	property that needs immediate attention?			diate attention is why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where i	s the property?	Number, Street, City, State & Zip Code			

Debtor 1 Teray L. Mack
Debtor 2 LaStacia N. Mack

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Official Form 101

	tor 1 Teray L. Mack tor 2 LaStacia N. Mack				Case numbe	「 (if known)			
Part	6: Answer These Questi	ions for R	eporting Purposes						
16.	What kind of debts do you have?	16a.	Are your debts primarily co			ned in 11 U.S.C. § 101(8) as "incurred by an			
			☐ No. Go to line 16b.						
			Yes. Go to line 17.						
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.						
			☐ No. Go to line 16c.						
			☐ Yes. Go to line 17.						
		16c.	State the type of debts you o	we that are not consun	ner debts or busines	s debts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter	7. Go to line 18.					
	Do you estimate that after any exempt property is excluded and administrative expenses	■ Yes.	I am filing under Chapter 7. I are paid that funds will be av			erty is excluded and administrative expenses			
	are paid that funds will be available for distribution to unsecured creditors?		□ Yes						
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-1 □ 200-9	99	☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,00		☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000			
19.	How much do you estimate your assets to be worth?	1 \$100,	:50,000 :01 - \$100,000 :001 - \$500,000 :001 - \$1 million	□ \$1,000,001 - □ \$10,000,001 □ \$50,000,001 □ \$100,000,00	- \$50 million - \$100 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
20.	How much do you estimate your liabilities to be?	□ \$100,	550,000 001 - \$100,000 001 - \$500,000 001 - \$1 million	\$1,000,001 - \$10,000,001 \$50,000,001 \$100,000,00	- \$50 million - \$100 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion			
Part	7: Sign Below								
For	you	I have ex	camined this petition, and I dec	clare under penalty of p	erjury that the inform	nation provided is true and correct.			
			•	•	, , ,	under Chapter 7, 11,12, or 13 of title 11, oose to proceed under Chapter 7.			
			rney represents me and I did int, I have obtained and read th			t an attorney to help me fill out this			
		I request	relief in accordance with the	chapter of title 11, Unite	ed States Code, spec	cified in this petition.			
		bankrupt and 357	cy case can result in fines up		nment for up to 20 y	r property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519			
		/s/ Teray L	y L. Mack		/s/ LaStacia N. Mac				
			e of Debtor 1		Signature of Debtor				

Official Form 101

Executed on May 10, 2019 MM / DD / YYYY

Executed on May 10, 2019 MM / DD / YYYY

Debtor 1	Teray L. Mack	
Debtor 2	LaStacia N. Mack	Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Keith L. Borders	Date	May 10, 2019
Signature of Attorney for Debtor		MM / DD / YYYY
Keith L. Borders		
Printed name		
Borders & Gerace LLC		
Firm name		
3401 Enterprise Parkway		
Suite 340		
Beachwood, OH 44122		
Number, Street, City, State & ZIP Code		
Contact phone 216-766-5704	Email address	kblaw123@gmail.com
0073020 OH		
Bar number & State		

Filli	n this infor	mation to identify your ca	ase:			
Deb	tor 1	Teray L. Mack				
Deb	tor 2	First Name LaStacia N. Mack	Middle Name	Last Name		
	se if, filing)	First Name	Middle Name	Last Name		
Unit	ed States Ba	ankruptcy Court for the:	NORTHERN DISTRIC	T OF OHIO		
	e number					
(if kno	own)				_	if this is an ded filing
Off	icial Fo	orm 106Sum				-
Sui	nmary (of Your Assets a	nd Liabilities a	nd Certain Statistical Informatio	n 1	2/15
nfor	mation. Fill original for	lout all of your schedules	s first; then complete t	e are filing together, both are equally responsibl the information on this form. If you are filing ame ok the box at the top of this page.	ended schedul	es after you file
		115 5	400A (D)		value 0	i what you own
1.	1a. Copy lin	A/B: Property (Official For ne 55, Total real estate, fro	m 106A/B) m Schedule A/B		\$	48,500.00
	1b. Copy lii	ne 62, Total personal prope	erty, from Schedule A/B		\$	54,040.79
	1c. Copy lir	ne 63, Total of all property	on Schedule A/B		. \$	102,540.79
Part	2: Sumn	marize Your Liabilities				
						abilities you owe
2.		D: Creditors Who Have Cla ne total you listed in Colum		ty (Official Form 106D) t the bottom of the last page of Part 1 of <i>Schedule D</i>	o \$	49,127.03
3.		E/F: Creditors Who Have U	`	al Form 106E/F) ms) from line 6e of <i>Schedule E/F</i>	\$	5,000.00
	3b. Copy t	the total claims from Part 2	(nonpriority unsecured	claims) from line 6j of Schedule E/F	\$	37,489.42
				Your total liabilit	ies \$	91,616.45
Part	3: Sumn	narize Your Income and E	Expenses			
4.		: Your Income (Official Formation Combined Monthly income		le I	. \$	3,935.50
5.		J: Your Expenses (Official F monthly expenses from line			\$	4,726.61
Part	4: Answ	ver These Questions for A	Administrative and Sta	tistical Records		
6.	-	ling for bankruptcy under	• ' '		your other och	andulas
		ou have nothing to report of	ni uns part of the form. C	Check this box and submit this form to the court with	your other sch	ieuules.
7.	YesWhat kind	of debt do you have?				
	■ Your	debts are primarily consu	u mer debts. Consumer	debts are those "incurred by an individual primarily	for a personal,	family, or

the court with your other schedules.

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Official Form 106Sum

page 1 of 2
Best Case Bankruptcy

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

8. **From the Statement of Your Current Monthly Income:** Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

8,367.01

\$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total cla	aim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	5,000.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	5,000.00

Official Form 106A/B Schedule A/B: Property 12/15 neach category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you hink it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? What is the property? Check all that apply Sirgle-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home		Teray L. Mac	ck				
Difficial Form 106A/B Schedule A/B: Property				Name	Last Name		
Case number				Name	Last Name		
Difficial Form 106A/B Schedule A/B: Property 12/15	Jnited States Ba	ankruptcy Court for	the: NORTHER	N DISTF	RICT OF OHIO		
Difficial Form 106A/B Schedule A/B: Property reach category, separately list and describe lotms. List an asset only once. If an asset fits in more than one category, list the asset in the category where ye in kink if its best. Se as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct formation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). If the property is never to the property? Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest in Describe Each Residence, Building, Land, or similar property? No. Go to Part 2. What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Chagrin Falls OH 44023-0000 City State 2IP Code Who has an interest in the property? Check one Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 residence Pobletor 1 only Debtor 4 and Debter 2 only Legal Describe the nature of your ownership interest (see state), if known. Joint tenant Check if this is community property (see state), if known. Joint tenant Check if this is community property (see state), if known. Joint tenant Check if this is community property (see state), if known. Joint tenant Legal Describion: S/L 366*CHAGRIN FALLS PARK SUB, S/L 367*CHAGRIN FALLS PARK SUB, S/L 368*CHAGRIN FALLS	Case number _						☐ Check if this is a
Schedule A/B: Property reach category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you link it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more open are equally responsible for supplying correct information. If more open are equally responsible for supplying correct information. If more open are equally responsible for supplying correct information. If more open are equally responsible for supplying correct information. If more open are equally responsible for supplying correct information. If more open are equally responsible for supplying correct information. If more open are equally responsible for supplying correct information. If more open are equally responsible for supplying correct information. If more open are equally responsible for supplying correct information. If more open are equally responsible for supplying correct information. If more open are equally responsible for supplying correct information. If more open are equally responsible for supplying correct information. If the property is not open and an interest in the property? In the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or							amended filing
As a case only once. If an asset fits in more than one category, list the asset in the category where you link it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Bescribe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest in Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? What is the property? Check all that apply Sirest address, if available, or other description Chagrin Falls OH 44023-0000 City State ZIP Code What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Current value of the entire property? Secured by Property Who has an interest in the property? Check one Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only All least one of the debtors and another Other information you wish to add about this item, such as local property identification number: Debtor's Residence PPN#s: 02-30110, 02-301200, 02-301300, 02-301400, 02-301500 Legal Description: S/L 366^CHAGRIN FALLS PARK SUB, S/L 368^CCHAGRIN FALLS PARK SUB, S/L 3	Official Fo	rm 106Δ/B	\				
Lech category, separately list and describe items. List an asset only none. If an asset fifts in more than one category, list the asset in the category where your link if file back. Be as complete and accurate as possible. If two married people are filing register, both are equally responsible for supplying correct violentian. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Part 1: Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Chagrin Falls OH 44023-0000 City State ZIP Code Who has an interest in the property? Check and that apply Investment property Who has an interest in the property? Check and another Other information you wish to add about this item, such as local property identification number: Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only Legal Description: S/L 366^CHAGRIN FALLS PARK SUB, S/L 367^CHAGRIN FALLS PARK SUB, S/L 369^CCHAGRIN FALLS PARK SUB, S/L 367^CCHAGRIN FALLS PARK SUB, S/L 368^C			_				12/15
Appendix promation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Post 12	n each category, s	separately list and de	lescribe items. List a				the category where you
Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2.	nformation. If mor	e space is needed, a					
Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2.							
No. Go to Part 2.	Part 1: Describe	Each Residence, Bu	uilding, Land, or Ot	her Real I	Estate You Own or Have an Interest In		
## Yes. Where is the property? 1.1	. Do you own or	have any legal or eq	uitable interest in a	ny reside	ence, building, land, or similar property?		
## Street address, if available, or other description Street address, if available, or other description	☐ No. Go to Pa	rt 2.					
Single-family home	Yes. Where i	s the property?					
Street address, if available, or other description Single-family home							
Single-family home							
Street address, if available, or other description Duplex or multi-unit building Condominium or cooperative		ron Street		What i			
Chagrin Falls OH 44023-0000 City State ZIP Code Investment property Other Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: Debtors' Residence PN#s: 02-30110, 02-301200, 02-301300, 02-301400, 02-301500 Legal Description: S/L 366^CHAGRIN FALLS PARK SUB, S/L 369^CHAGRIN FALLS PARK SUB, S/L 370^CHAGRIN FALLS PARK			cription	_			
Chagrin Falls OH 44023-0000 City State ZIP Code Investment property Investment pr				_	•	Creditors Who Have Clair	ms Secured by Property.
Chagrin Falls OH 44023-0000 Land Investment property S48,500.00 \$48,500. S48,500.00 \$48,500. Describe the nature of your ownership interes (such as fee simple, tenancy by the entireties, a life estate), if known. Joint tenant County Check if this is community property Check if this is community				_	·		
City State ZIP Code Investment property \$48,500.00 \$18,000.00			44000 0000				Current value of the
Geauga County Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: Debtors' Residence PPN#s: 02-30110, 02-301200, 02-301300, 02-301400, 02-301500 Legal Description: S/L 366^CHAGRIN FALLS PARK SUB, S/L 369^CHAGRIN FALLS PARK SUB, S/L 370^CHAGRIN FALLS PARK SUB, S/L 370^CHAGRIN FALLS PARK Describe the nature of your ownership interes (such as fee simple, tenancy by the entireties, a life estate), if known. Joint tenant Check if this is community property (see instructions) Check if this is community property (see instructions) Debtors' Residence PPN#s: 02-30110, 02-301200, 02-301300, 02-301400, 02-301500						· · · · · ·	· · · · · ·
Geauga County Geauga Debtor 1 only Debtor 2 only Debtor 1 and Debtors and another Other information you wish to add about this item, such as local property identification number: Debtors' Residence PPN#s: 02-30110, 02-301200, 02-301300, 02-301400, 02-301500 Legal Description: S/L 366^CHAGRIN FALLS PARK SUB, S/L 369^CHAGRIN FALLS PARK SUB, S/L 370^CHAGRIN FALLS PARK SUB, S/L 370^CHAGRIN FALLS PARK		State ZIP Code Investment property	ZIF Code				Ψ + 0,300.0
Geauga Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: Debtors' Residence PPN#s: 02-30110, 02-301200, 02-301300, 02-301400, 02-301500 Legal Description: S/L 366^CHAGRIN FALLS PARK SUB, S/L 367^CHAGRIN FALLS PARK SUB, S/L 369^CHAGRIN FALLS PARK SUB, S/L 370^CHAGRIN FALLS PARK		Glate					
Geauga County Debtor 2 only Legal Description: S/L 366^CHAGRIN FALLS PARK SUB, S/L 369^CHAGRIN FALLS PARK SUB, S/L 369^CHAGRIN FALLS PARK SUB, S/L 370^CHAGRIN FALLS PARK Debtor 2 only Check if this is community property (see instructions) Other information you wish to add about this item, such as local property identification number: Debtors' Residence PPN#s: 02-30110, 02-301200, 02-301300, 02-301400, 02-301500		State		_	Other		
Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: Debtors' Residence PPN#s: 02-30110, 02-301200, 02-301300, 02-301400, 02-301500 Legal Description: S/L 366^CHAGRIN FALLS PARK SUB, S/L 367^CHAGRIN FALLS PARK SUB, S/L 369^CHAGRIN FALLS PARK SUB, S/L 370^CHAGRIN FALLS PARK		State		Who h	nas an interest in the property? Check one	(such as fee simple, ten a life estate), if known.	
Other information you wish to add about this item, such as local property identification number: Debtors' Residence PPN#s: 02-30110, 02-301200, 02-301300, 02-301400, 02-301500 Legal Description: S/L 366^CHAGRIN FALLS PARK SUB, S/L 367^CHAGRIN FALLS PARK SUB, S/L 369^CHAGRIN FALLS PARK SUB, S/L 370^CHAGRIN FALLS PARK	City	Ciale		Who h	has an interest in the property? Check one Debtor 1 only	(such as fee simple, ten a life estate), if known.	
Other information you wish to add about this item, such as local property identification number: Debtors' Residence PPN#s: 02-30110, 02-301200, 02-301300, 02-301400, 02-301500 Legal Description: S/L 366^CHAGRIN FALLS PARK SUB, S/L 367^CHAGRIN FALLS PARK SUB, S/L 368^CHAGRIN FALLS PARK SUB, S/L 370^CHAGRIN FALLS PARK	City	Claic		Who h	nas an interest in the property? Check one Debtor 1 only Debtor 2 only	(such as fee simple, ten a life estate), if known.	
property identification number: Debtors' Residence PPN#s: 02-30110, 02-301200, 02-301300, 02-301400, 02-301500 Legal Description: S/L 366^CHAGRIN FALLS PARK SUB, S/L 367^CHAGRIN FALLS PARK SUB, S/L 368^CHAGRIN FALLS PARK SUB, S/L 369^CHAGRIN FALLS PARK SUB, S/L 370^CHAGRIN FALLS PARK	City Geauga	Claic		Who h	nas an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	(such as fee simple, ten a life estate), if known. Joint tenant Check if this is con	ancy by the entireties, o
PPN#s: 02-30110, 02-301200, 02-301300, 02-301400, 02-301500 Legal Description: S/L 366^CHAGRIN FALLS PARK SUB, S/L 367^CHAGRIN FALLS PARK SUB, S/L 368^CHAGRIN FALLS PARK SUB, S/L 369^CHAGRIN FALLS PARK SUB, S/L 370^CHAGRIN FALLS PARK	City Geauga	Ciale		Who h	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	(such as fee simple, ten a life estate), if known. Joint tenant Check if this is con (see instructions)	ancy by the entireties, o
Legal Description: S/L 366^CHAGRIN FALLS PARK SUB, S/L 367^CHAGRIN FALLS PARK SUB, S/L 368^CHAGRIN FALLS PARK SUB, S/L 369^CHAGRIN FALLS PARK SUB, S/L 370^CHAGRIN FALLS PARK	City Geauga	Claic		Who h	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another information you wish to add about this item.	(such as fee simple, ten a life estate), if known. Joint tenant Check if this is con (see instructions)	ancy by the entireties, o
367^CHAGRIN FALLS PARK SUB, S/L 368^CHAGRIN FALLS PARK SUB, S/L 369^CHAGRIN FALLS PARK SUB, S/L 370^CHAGRIN FALLS PARK	City Geauga	Claic		Who h	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another information you wish to add about this iterty identification number:	(such as fee simple, ten a life estate), if known. Joint tenant Check if this is con (see instructions)	ancy by the entireties, o
367^CHAGRIN FALLS PARK SUB, S/L 368^CHAGRIN FALLS PARK SUB, S/L 369^CHAGRIN FALLS PARK SUB, S/L 370^CHAGRIN FALLS PARK	City Geauga	Ciale		Who h	nas an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another information you wish to add about this iterty identification number: cors' Residence	(such as fee simple, ten a life estate), if known. Joint tenant Check if this is con (see instructions) m, such as local	nancy by the entireties, o
	City Geauga	Ciale		Who h	nas an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another information you wish to add about this iter rty identification number: ors' Residence #s: 02-30110, 02-301200, 02-3013	(such as fee simple, ten a life estate), if known. Joint tenant Check if this is con (see instructions) m, such as local 00, 02-301400, 02-30	nancy by the entireties, o
SUB	City Geauga	Cialc		Who h	nas an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another information you wish to add about this iter rty identification number: cors' Residence #s: 02-30110, 02-301200, 02-3013	(such as fee simple, ten a life estate), if known. Joint tenant Check if this is con (see instructions) m, such as local 00, 02-301400, 02-30	nmunity property 1500 S/L
	City Geauga	Cialc		Who h	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another information you wish to add about this iterty identification number: Ors' Residence #s: 02-30110, 02-301200, 02-3013 Il Description: S/L 366^CHAGRIN CHAGRIN FALLS PARK SUB, S/L	(such as fee simple, ten a life estate), if known. Joint tenant Check if this is con (see instructions) m, such as local 00, 02-301400, 02-30 FALLS PARK SUB, 368*CHAGRIN FAL	nmunity property 1500 S/L LS PARK SUB,
	City Geauga	Cialc		Who h	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another information you wish to add about this iterty identification number: Ors' Residence #s: 02-30110, 02-301200, 02-3013 Il Description: S/L 366^CHAGRIN CHAGRIN FALLS PARK SUB, S/L	(such as fee simple, ten a life estate), if known. Joint tenant Check if this is con (see instructions) m, such as local 00, 02-301400, 02-30 FALLS PARK SUB, 368*CHAGRIN FAL	nmunity property 1500 S/L LS PARK SUB,
pages you have attached for Part 1. Write that number here	Geauga County 2. Add the dol	lar value of the po		Who h	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another information you wish to add about this iterty identification number: cors' Residence #s: 02-30110, 02-301200, 02-3013 Al Description: S/L 366^CHAGRIN CHAGRIN FALLS PARK SUB, S/L 369^CHAGRIN FALLS PARK SUB, S/L 369^CHAGRIN FALLS PARK SUB, S/L 3609 CHAGRIN FALLS PARK SU	(such as fee simple, ten a life estate), if known. Joint tenant Check if this is con (see instructions) m, such as local 00, 02-301400, 02-30 FALLS PARK SUB, 368^CHAGRIN FAL, S/L 370^CHAGRIN I	nmunity property 1500 S/L LS PARK SUB,

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Schedule A/B: Property

Official Form 106A/B

page 1

	otor 1 otor 2	Teray L. Mack LaStacia N. Mack		ase number (if known)	
3. C	ars, var	ns, trucks, tractors, sport utility ve	hicles, motorcycles		
] No				
	Yes				
3.1	I Make: Mode Year:	Pilot	Who has an interest in the property? Check one ☐ Debtor 1 only ☐ Debtor 2 only	the amount of any secu Creditors Who Have Cla	claims or exemptions. Put red claims on Schedule D: aims Secured by Property.
	Appro Other	eximate mileage: 130,000+ information:	Debtor 1 and Debtor 2 only At least one of the debtors and another	Current value of the entire property?	Current value of the portion you own?
	Debt	or's Possession	☐ Check if this is community property (see instructions)	\$6,500.00	\$6,500.00
5 A	t3: Desi	ou have attached for Part 2. Write cribe Your Personal and Household It nor have any legal or equitable in	rn for all of your entries from Part 2, including a that number hereems ems terest in any of the following items?		\$6,500.00 Current value of the portion you own? Do not deduct secured claims or exemptions.
	Example ⊒ No	Id goods and furnishings s: Major appliances, furniture, linens	, china, kitchenware		
	Yes. I	Describe			
		Household Goo	ds and Furnishings, Debtor(s) Possession	1	\$3,000.00
	□No	s: Televisions and radios; audio, vid- including cell phones, cameras, m	eo, stereo, and digital equipment; computers, printenedia players, games cs, Debtor(s) Possession	ers, scanners; music collec	tions; electronic devices
	Example ■ No	les of value s: Antiques and figurines; paintings, other collections, memorabilia, co	prints, or other artwork; books, pictures, or other and llectibles	rt objects; stamp, coin, or b	aseball card collections;
I.	Example ■ No	nt for sports and hobbies s: Sports, photographic, exercise, ar musical instruments	nd other hobby equipment; bicycles, pool tables, go	olf clubs, skis; canoes and k	kayaks; carpentry tools;

Official Form 106A/B Schedule A/B: Property

page 2

Best Case Bankruptcy

Debtor 1 Debtor 2	Teray L. Mack LaStacia N. Mack	Case number (if known	ı)
10. Firear			
Exam ■ No	nples: Pistols, rifles, shotguns, ammunition, and	I related equipment	
☐ Yes	. Describe		
11. Cloth		signer wear about acceptance	
□ No	nples: Everyday clothes, furs, leather coats, des	signer wear, shoes, accessones	
■ Yes	. Describe		
	Wearing Apparel, Deb	tor(s) Possession	\$800.00
12. Jewel <i>Exan</i> □ No		gement rings, wedding rings, heirloom jewelry, watches, gems,	gold, silver
	. Describe		
	Misc. Jewelry, Debtor(s) Possession	\$500.00
		9,1 000000.0.1	
	arm animals		
■ No	nples: Dogs, cats, birds, horses		
☐ Yes	. Describe		
	ther personal and household items you did	not already list, including any health aids you did not list	
■ No □ Yes	. Give specific information		
	the dollar value of all of your entries from Fort 3. Write that number here	Part 3, including any entries for pages you have attached	\$5,050.00
_			
	escribe Your Financial Assets wn or have any legal or equitable interest ir	any of the following?	Current value of the
ŕ			portion you own? Do not deduct secured claims or exemptions.
16. Cash			
Exan □ No	nples: Money you have in your wallet, in your h	ome, in a safe deposit box, and on hand when you file your pet	tion
■ Yes			
		Cash on	
		Hand, Debtor(s)	
		Possession	\$0.00
	sits of money nples: Checking, savings, or other financial accinetizations. If you have multiple accounts	ounts; certificates of deposit; shares in credit unions, brokerages with the same institution, list each.	houses, and other similar
□ No	, ,	Institution name:	
■ Yes		institution name.	
	17.1.	Checking Account, Huntington Bank	\$50.00
	17.2.	Savings Account, Huntington Bank	\$5.00
	··· ·- ·		

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Official Form 106A/B

Debtor 1 Debtor 2	Teray L. Mack LaStacia N. Mack		Case number (if known)	
	17.3.		Savings Account, Ohio First Class Credit Union	\$8.00
	s, mutual funds, or public ples: Bond funds, investme		kerage firms, money market accounts	
■ No □ Yes.		Institution or issuer r	name:	
-	ublicly traded stock and i venture	nterests in incorpo	orated and unincorporated businesses, including an interest in an L	LC, partnership, and
	Give specific information Nan	about them ne of entity:	 % of ownership:	
Negot	<i>tiable instrument</i> s include p	ersonal checks, casl	tiable and non-negotiable instruments hiers' checks, promissory notes, and money orders. nsfer to someone by signing or delivering them.	
☐ Yes.	Give specific information a	bout them er name:		
<i>Exam</i> □ No	•	sA, Keogh, 401(k), 40	03(b), thrift savings accounts, or other pension or profit-sharing plans	
■ Yes.	List each account separate Type of	ely. of account:	Institution name:	
			PERS, Debtor's Employer	\$38,000.00
			Deferred Compensation, Debtor's Employer	\$2,960.87
Your s Exam ■ No	ity deposits and prepaym share of all unused deposit ples: Agreements with land	s you have made so	that you may continue service or use from a company public utilities (electric, gas, water), telecommunications companies, or constitution name or individual:	others
		lic payment of mone	y to you, either for life or for a number of years)	
☐ Yes.	lssuer name	e and description.		
	ts in an education IRA, in C. §§ 530(b)(1), 529A(b), a		ualified ABLE program, or under a qualified state tuition program.	
☐ Yes.	Institution n	ame and description	. Separately file the records of any interests.11 U.S.C. § 521(c):	
25. Trusts ■ No	, equitable or future inter	ests in property (ot	ther than anything listed in line 1), and rights or powers exercisable	e for your benefit
	Give specific information	about them		
Exam ■ No —		es, websites, proceed	d other intellectual property ds from royalties and licensing agreements	
27. Licens <i>Exam</i>	ses, franchises, and other	general intangible	erative association holdings, liquor licenses, professional licenses	
■ No □ Yes.	Give specific information	about them		
Official For	m 106A/B		Schedule A/B: Property	page 4

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Debtor 1 Debtor 2	Teray L. Mack LaStacia N. Mack		Case number (if known	n)
Money or	property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
☐ No	funds owed to you			
Yes.	. Give specific information about th	em, including whether you alread	dy filed the returns and the tax years	
		2019 Tax refunds		Unknown
■ No		y, spousal support, child suppor	t, maintenance, divorce settlement, proper	rty settlement
Exam	benefits; unpaid loans you m		fits, sick pay, vacation pay, workers' comp	pensation, Social Security
	. Give specific information			
	sts in insurance policies apples: Health, disability, or life insur	ance; health savings account (H	SA); credit, homeowner's, or renter's insur	rance
■ Yes.	. Name the insurance company of Company r		Beneficiary:	Surrender or refund value:
	Term Life Employer	Insurance, Debtors'		
	No cash v	/alue		\$0.00
If you some	nterest in property that is due yo are the beneficiary of a living trust one has died. . Give specific information		l urance policy, or are currently entitled to re	eceive property because
Exam ■ No	s against third parties, whether on the second seco			
□ No		ims of every nature, including	counterclaims of the debtor and rights	to set off claims
■ Yes.	. Describe each claim			_
			or's pay during the 90 days filing by Redrock Financial	\$1,466.92
■ No	nancial assets you did not alread . Give specific information	dy list		

Official Form 106A/B Schedule A/B: Property page 5

	otor 1 otor 2	Teray L. Mack LaStacia N. Mack		Case number (if known)	
36.		the dollar value of all of your entries from Part 4, includinant 4. Write that number here			\$42,490.79
Par	t 5 : De	scribe Any Business-Related Property You Own or Have an Inte	erest In. List any real esta	ate in Part 1.	
37. I	Do you	own or have any legal or equitable interest in any business-rela	ted property?		
	No. Go	to Part 6.			
	Yes. C	Go to line 38.			
Par		scribe Any Farm- and Commercial Fishing-Related Property You ou own or have an interest in farmland, list it in Part 1.	u Own or Have an Intere	st In.	
46.	Do yoι	ı own or have any legal or equitable interest in any farm	- or commercial fishir	ng-related property?	
	No.	Go to Part 7.			
	☐ Yes	. Go to line 47.			
Par	t 7:	Describe All Property You Own or Have an Interest in That Yo	ou Did Not List Above		
53.	Do yoι	ı have other property of any kind you did not already lis	1?		
_	_ ′	oles: Season tickets, country club membership			
_	No				
L	┙Yes.	Give specific information			
54.	Add t	he dollar value of all of your entries from Part 7. Write th	nat number here		\$0.00
Par	t 8:	List the Totals of Each Part of this Form			
55.	Part 1	l: Total real estate, line 2			\$48,500.00
56.	Part 2	2: Total vehicles, line 5	\$6,500.00		
57.	Part 3	3: Total personal and household items, line 15	\$5,050.00		
58.	Part 4	4: Total financial assets, line 36	\$42,490.79		
59.	Part 5	5: Total business-related property, line 45	\$0.00		
60.	Part 6	6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	7: Total other property not listed, line 54	+\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$54,040.79	Copy personal property total	\$54,040.79
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$102,540.79

Official Form 106A/B Schedule A/B: Property page 6

Debtor 1	Teray L. Mack			
	First Name	Middle Name	Last Name	
Debtor 2	LaStacia N. Mad	ck		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the	NORTHERN DISTRICT	OF OHIO	
Case number				
(if known)				Check if this is an amended filing
Official Fo	orm 106C			
Schodul	C The D	ronerty Vou (Claim as Exempt	4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	rt 1: Identify the Property You Claim as Ex	kempt			
1.	Which set of exemptions are you claiming?	Check one only, eve	n if yo	ur spouse is filing with you.	
	■ You are claiming state and federal nonbank	ruptcy exemptions. 1	11 U.S	S.C. § 522(b)(3)	
	☐ You are claiming federal exemptions. 11 U	J.S.C. § 522(b)(2)			
2.	For any property you list on Schedule A/B	hat you claim as exe	mpt,	fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	16750 Akron Street Chagrin Falls, OH	\$48,500.00			Ohio Rev. Code Ann. §
	44023 Geauga County Debtors' Residence PPN#s: 02-30110, 02-301200, 02-301300, 02-301400, 02-301500			100% of fair market value, up to any applicable statutory limit	2329.66(A)(1)
	Legal Description: S/L 366^CHAGRIN FALLS PARK SUB, S/L 367^CHAGRIN FALLS PARK SUB, S/L 368^CHAGRIN FALLS PARK SU Line from Schedule A/B: 1.1				
	2006 Honda Pilot 130,000+ miles Debtor's Possession	\$6,500.00		\$4,000.00	Ohio Rev. Code Ann. § 2329.66(A)(2)
	Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	2020.00(A)(2)
	Household Goods and Furnishings, Debtor(s) Possession	\$3,000.00		\$3,000.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
	Line from Schedule A/B: 6.1			100% of fair market value, up to	2023.00(A)(4)(a)

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

Brief description of the property and line on	Current value of the	Amo	ount of the exemption you claim	Specific laws that allow exemption
Schedule A/B that lists this property	portion you own Copy the value from	Che	eck only one box for each exemption.	
Mica Flactuarias Dahtar(a)	Schedule A/B			Ohio Day Cada Ann S
Misc. Electronics, Debtor(s) Possession	\$750.00		\$750.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
Wearing Apparel, Debtor(s) Possession	\$800.00		\$800.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit	
Misc. Jewelry, Debtor(s) Possession Line from Schedule A/B: 12.1	\$500.00		\$500.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(b)
			100% of fair market value, up to any applicable statutory limit	. , , , , ,
Checking Account, Huntington Bank ine from Schedule A/B: 17.1	\$50.00		\$50.00	Ohio Rev. Code Ann. § 2329.66(A)(3)
			100% of fair market value, up to any applicable statutory limit	
Savings Account, Huntington Bank ine from Schedule A/B: 17.2	\$5.00		\$5.00	Ohio Rev. Code Ann. § 2329.66(A)(3)
			100% of fair market value, up to any applicable statutory limit	. ,,,
Savings Account, Ohio First Class Credit Union	\$8.00		\$8.00	Ohio Rev. Code Ann. § 2329.66(A)(3)
ine from Schedule A/B: 17.3			100% of fair market value, up to any applicable statutory limit	
PERS, Debtor's Employer Line from Schedule A/B: 21.1	\$38,000.00		\$38,000.00	Ohio Rev. Code Ann. §§ 2329.66(A)(10)(a), 521.09,
			100% of fair market value, up to any applicable statutory limit	145.56, 145.75, 145.13, 742.47 3307.71
Deferred Compensation, Debtor's Employer	\$2,960.87		\$2,960.87	Ohio Rev. Code Ann. § 2329.66(A)(10)(b)
Line from Schedule A/B: 21.2			100% of fair market value, up to any applicable statutory limit	, , , , , , , , , , , , , , , , , , ,
Funds garnished from Debtor's pay during the 90 days preceeding the	\$1,466.92		\$1,325.00	Ohio Rev. Code Ann. § 2329.66(A)(18)
bankruptcy filing by Redrock Financial Line from Schedule A/B: 34.1			100% of fair market value, up to any applicable statutory limit	() ()

No

☐ Yes

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 2 of 2

Fill in this inform	ation to identify you	ır case:				
Debtor 1	Teray L. Mack					
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	LaStacia N. Mac	Middle Name	Last Name			
	kruptcy Court for the:	: NORTHERN DISTRICT OF OHI	0			
onited Glates Ban	intropiley Court for the	- HORRIDAN BIOTRIOT OF ORIE				
Case number(if known)					_	if this is an
					amend	led filing
Official Form	106D					
Schedule	D: Creditors	Who Have Claims S	Secureo	by Propert	У	12/15
		If two married people are filing together			-	tion. If more space
		out, number the entries, and attach it to				
1. Do any creditors I	have claims secured by	y your property?				
☐ No. Check	this box and submit t	his form to the court with your other s	schedules. Yo	ou have nothing else t	o report on this form.	
Yes. Fill in	all of the information	below.				
Part 1: List All	Secured Claims					
		more than one secured claim, list the credi	litor separately	Column A	Column B	Column C
for each claim. If mo	ore than one creditor has	s a particular claim, list the other creditors i cal order according to the creditor's name.	in Part 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Capital On	e Auto Finance	Describe the property that secures th	ne claim:	\$2,527.00	\$6,500.00	\$0.00
Creditor's Name		2006 Honda Pilot 130,000+ m Debtor's Possession	iles			
P.O. Box 2 Plano, TX		As of the date you file, the claim is: C apply. Contingent	heck all that			
	City, State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the del	ot? Check one.	Nature of lien. Check all that apply.				
☐ Debtor 1 only ☐ Debtor 2 only		☐ An agreement you made (such as m car loan)	ortgage or sec	ured		
■ Debtor 1 and Del	btor 2 only	☐ Statutory lien (such as tax lien, mech	nanic's lien)			
☐ At least one of th	e debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this cla		Other (including a right to offset)	Purchase N	loney Security		

Official Form 106D

Date debt was incurred 2012

Schedule D: Creditors Who Have Claims Secured by Property

Last 4 digits of account number

XXXX

page 1 of 3

Debtor 1 Teray L. Mack		Case number (if known)		
First Name Middle N	lame Last Name			
Debtor 2 LaStacia N. Mack				
First Name Middle N	lame Last Name			
Geuaga County		#0.202.00	#40 500 00	¢0.00
Ireasurer	Describe the property that secures the claim:	\$8,292.09	\$48,500.00	\$0.00
Creditor's Name 211 Main Street #1	16750 Akron Street Chagrin Falls, OH 44023 Geauga County Debtors' Residence PPN#s: 02-30110, 02-301200, 02-301300, 02-301400, 02-301500 Legal Description: S/L 366^CHAGRIN FALLS PARK SUB, S/L 367^CHAGRIN FALLS PARK SUB, S/L 368^CHAGR As of the date you file, the claim is: Check all that			
Chardon, OH 44024	apply. ☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
rumbor, etreet, etty, etate a zip eeue	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only	☐ An agreement you made (such as mortgage or	secured		
Debtor 2 only	car loan)			
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien))		
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset) Property	Taxes		
Date debt was incurred 2019	Last 4 digits of account number	<u>x</u>		
2.3 Robert L. Reynolds	Describe the property that secures the claim:	\$36,470.82	\$48,500.00	\$0.00
Creditor's Name	16750 Akron Street Chagrin Falls, OH 44023 Geauga County Debtors' Residence PPN#s: 02-30110, 02-301200, 02-301300, 02-301400, 02-301500 Legal Description: S/L 366^CHAGRIN FALLS PARK SUB, S/L 367^CHAGRIN FALLS PARK SUB, S/L 368^CHAGR			
40004 Ot Olein Assesses	As of the date you file, the claim is: Check all that			
19391 St. Clair Avenue Euclid, OH 44117	apply. Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or car loan)	secured		
Debtor 2 only				
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit	_		
☐ Check if this claim relates to a community debt	Other (including a right to offset)	e		
Date debt was incurred 12/2015	Last 4 digits of account number XXX	x		

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

page 2 of 3

Pist Name Middle Name Last Name 2.4 Sterling Jewelers Describe the property that secures the claim: \$1,837.12 \$48,500.00 \$0.00 Creditor's Name Middle Name Last Name 16750 Akron Street Chagrin Falls, OH 44023 Geauga County Debtors' Residence PPN#s: 02-30110, 02-301200, 02-301300, 02-301400, 02-301500 Legal Description: S/L 366^CHAGRIN FALLS PARK SUB, S/L 367^CHAGRIN FALLS PARK SUB, S/L 366^CHAGRIN FALLS PARK	Debtor 4 Tanana Maraka		Casa number (v.		
Debtor 2 LaStacia N. Mack First Name 2.4 Sterling Jewelers Describe the property that secures the claim: S1,837.12 \$48,500.00 \$0.00 16750 Akron Street Chagrin Falls, OH 44023 Geaugy County Debtors Residence PPNiss: 02-30110, 02-301200, 02-301300, 02-301400, 02-301500 Legal Description: S/L 366^CHAGRIN FALLS PARK SUB, S/L 367^CHAGRIN FALLS PARK SUB, S/L 366^CHAGRIN FALLS PARK	Debtor 1 Teray L. Mack First Name Middle N	lama Last Nama	Case number (if known)		
Sterling Jewelers		Last Name			
16750 Akron Street Chagrin Falls, OH 44023 Geauga County Debtors' Residence PPN#s: 02-30110, 02-301200, 02-301300, 02-301400, 02-301500		lame Last Name			
16750 Akron Street Chagrin Falls, OH 44023 Geauga County Debtors' Residence PPN#s: 02-30110, 02-301200, 02-301300, 02-301400, 02-301500					
At the dollar value of your entries in Column A on this page. Write that number here: At the dollar value of your entries in Column A on this page. Write that number here:		Describe the property that secures the claim	. \$1,837.12	\$48,500.00	\$0.00
Debtor's Residence PNess: 02-3011, 02-301200, 02-301300, 02-301300, 02-301400, 02-301500 Legal Description: S/L 366°CHAGRIN FALLS PARK SUB, S/L 366°CHAGRIN F	Creditor's Name				
PPNsts: 02-30110, 02-301200, 02-301500 Legal Description: S/L 366*CHAGRIN FALLS PARK SUB, S/L 367*CHAGRIN FALLS PARK SUB, S/L 366*CHAGRIN FALLS PARK SUB, S/L 368*CHAGRIN FALLS PARK SUB, S/L		1			
C2-301300, 02-301400, 02-301500 Legal Description: S/L 366°CHAGRIN FALLS PARK SUB, S/L 368°CHAGRIN FALLS PARK SUB, S/L 368					
Legal Description: SfL 366^CHAGRIN FALLS PARK SUB, S/L 367^CHAGRIN FALLS PARK SUB, S/L 368^CHAGRIN FALLS PARK SUB, S/L 368^CHA					
366^CHAGRIN FALLS PARK SUB, S/L 367^CHAGRIN FALLS PARK SUB, S/L 367^CHAGRIN FALLS PARK SUB, S/L 368^CHAGR Akron, OH 44333		02-301300, 02-301400, 02-301300			
366^CHAGRIN FALLS PARK SUB, S/L 367^CHAGRIN FALLS PARK SUB, S/L 367^CHAGRIN FALLS PARK SUB, S/L 368^CHAGR Akron, OH 44333		Legal Description: S/L			
S/L 367*CHAGRIN FALLS PARK SUB, S/L 368*CHAGR Akron, OH 44333 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only An agreement you made (such as mortgage or secured car loan) Ceri foan) Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Date debt was incurred Add the dollar value of your entries in Column A on this page. Write that number here: If this is the last page of your form, add the dollar value totals from all pages. Write that number here: Fart 2: List Others to Be Notified for a Debt That You Already Listed Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is rying to collect from you for a debt you were to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page. Name, Number, Street, City, State & Zip Code Geauga County Court of Common Pleas 100 Short Court Street Chardon, OH 44024 Name, Number, Street, City, State & Zip Code Keith D. Weiner & Associates 75 Public Square 4th Floor		, ·			
Akron, OH 44333 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Date debt was incurred Add the dollar value of your entries in Column A on this page. Write that number here: Add the dollar value of your entries in Column A on this page. Write that number here: At 2 List Others to Be Notified for a Debt That You Already Listed List Others to Be Notified for a Debt That You Already Listed Nature of the debtors and another or a debt you owe to someone else, list the creditor in Part 1, do not fill out or submit this page. Name, Number, Street, City, State & Zip Code Keith D. Weiner & Associates 75 Public Square 4th Floor Associates Associates 75 Public Square 4th Floor		1			
Akron, OH 44333 Gontingent Unliquidated Disputed Unliquidated Disputed Debtor 1 only Debtor 1 only Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) Debtor 1 and Debtor 2 only Under the creditor 2 only Debtor 1 and Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) Debtor 1 and Debtor 2 only Under the creditor 2 only Under the creditor 3 one of the debtors and another Under the creditor 3 one of the debtor 3 one of the debtors and another Under the creditor 3 one of the debtor 3 one of the debtors and another Under the creditor 3 one of the debtor 3 one of the debtors and another Under the creditor 3 one of the debtor 3 one of the debtors and another Under the creditor 3 one of the debtor 3 one of the debt		SUB, S/L 368^CHAGR			
Akron, OH 44333 Number, Street, City, State & Zip Code Ontingent Unliquidated Disputed	375 Ghent Rd.		nat		
Who owes the debt? Check one. Debtor 1 only					
Who owes the debt? Check one. Disputed Nature of lien. Check all that apply.	Number, Street, City, State & Zip Code				
Who owes the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 2 only □ Statutory lien (such as tax lien, mechanic's lien) □ Debtor 2 only □ Debtor 2 only □ Debtor 3 only □ Debtor 4 and Debtor 2 only □ Debtor 4 and Debtor 2 only □ Judgment lien from a lawsuit □ Debtor 3 only □ Debtor 4 only Debtor 3 only □ Debtor 4 only Debtor 4 only Debtor 5 only □ Debtor 5 only □ Debtor 6 only Debtor 6 only Debtor 8 only Debtor 8 only Debtor 8 only Debtor 8 only Debtor 9 only Debtor	, , , . , . , , , , , , , , , , , , ,	<u> </u>			
□ Debtor 1 only □ Debtor 2 only □ An agreement you made (such as mortgage or secured car loan) □ Debtor 1 and Debtor 2 only □ Statutory lien (such as tax lien, mechanic's lien) □ At least one of the debtors and another □ Check if this claim relates to a community debt □ Other (including a right to offset) □ Other (including a right t	Who owes the debt? Check one.				
□ Debtor 2 only □ Statutory lien (such as tax lien, mechanic's lien) □ At least one of the debtors and another □ Check if this claim relates to a community debt □ Date debt was incurred 18CJ000316 □ Last 4 digits of account number □ XXXX □ Add the dollar value of your entries in Column A on this page. Write that number here: \$49,127.03 If this is the last page of your form, add the dollar value totals from all pages. □ \$49,127.03 Write that number here: □ \$49,127.03 White this page ofly if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page. Name, Number, Street, City, State & Zip Code Geauga County Court of Common Pleas 100 Short Court Street Chardon, OH 44024 Name, Number, Street, City, State & Zip Code Keith D. Weiner & Associates 75 Public Square Last 4 digits of account number □ Last 4 digits	Debtor 1 only	_	or secured		
■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a community debt Date debt was incurred 18CJ000316		, ,			
At least one of the debtors and another Check if this claim relates to a community debt Date debt was incurred 18CJ000316		☐ Statutory lien (such as tax lien, mechanic's li	en)		
Check if this claim relates to a community debt Date debt was incurred 18CJ000316	_	_	,		
Date debt was incurred 18CJ000316	_	3			
Add the dollar value of your entries in Column A on this page. Write that number here: \$49,127.03		Under (including a right to onset)			
Write that number here: \$49,127.03	Date debt was incurred 18CJ000316	Last 4 digits of account number X	xxx		
Write that number here: \$49,127.03					
Write that number here: \$49,127.03	Add the dollar value of your entries in C	Column A on this page. Write that number here:	\$49.127.03	₽	
Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page. Name, Number, Street, City, State & Zip Code Geauga County Court of Common Pleas 100 Short Court Street Chardon, OH 44024 Name, Number, Street, City, State & Zip Code Keith D. Weiner & Associates 75 Public Square 4th Floor Last 4 digits of account number Last 4 digits of account number Last 4 digits of account number	-		· · · · · · · · · · · · · · · · · · ·		
Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page. Name, Number, Street, City, State & Zip Code Geauga County Court of Common Pleas 100 Short Court Street Chardon, OH 44024 Name, Number, Street, City, State & Zip Code Keith D. Weiner & Associates 75 Public Square 4th Floor On which line in Part 1 did you enter the creditor? 2.4 Last 4 digits of account number Last 4 digits of account number	Write that number here:		\$49,12 <i>1</i> .03		
trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page. Name, Number, Street, City, State & Zip Code Geauga County Court of Common Pleas 100 Short Court Street Chardon, OH 44024 Name, Number, Street, City, State & Zip Code Keith D. Weiner & Associates 75 Public Square 4th Floor And then list the collection agency here. Similarly, if you have more than one creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor? Last 4 digits of not have additional persons to be notified for any debts in Part 1 did you enter the creditor? 2.4 Con which line in Part 1 did you enter the creditor? 2.4 Last 4 digits of account number Last 4 digits of account number	Part 2: List Others to Be Notified for	or a Debt That You Already Listed			
than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page. Name, Number, Street, City, State & Zip Code Geauga County Court of Common Pleas 100 Short Court Street Chardon, OH 44024 Name, Number, Street, City, State & Zip Code Keith D. Weiner & Associates 75 Public Square 4th Floor Name, Number, Street, City, State & Zip Code Keith D. Weiner & Associates 75 Public Square 4th Floor	Use this page only if you have others to b	pe notified about your bankruptcy for a debt that	at you already listed in Part 1. For e	example, if a collection a	gency is
Name, Number, Street, City, State & Zip Code Geauga County Court of Common Pleas 100 Short Court Street Chardon, OH 44024 Name, Number, Street, City, State & Zip Code Keith D. Weiner & Associates 75 Public Square 4th Floor On which line in Part 1 did you enter the creditor? 2.4 Last 4 digits of account number Un which line in Part 1 did you enter the creditor? 2.4 Last 4 digits of account number	than one creditor for any of the debts tha	t you listed in Part 1, list the additional creditor			
On which line in Part 1 did you enter the creditor?	debts in Fait 1, do not fill out or submit tr	iii paye.			
Geauga County Court of Common Pleas 100 Short Court Street Chardon, OH 44024 Name, Number, Street, City, State & Zip Code Keith D. Weiner & Associates 75 Public Square 4th Floor Last 4 digits of account number On which line in Part 1 did you enter the creditor? 2.4 Last 4 digits of account number	Name Number Street City State &	Zip Code	on which line in Part 1 did you enter th	o oroditor? 2.4	
100 Short Court Street Chardon, OH 44024 Name, Number, Street, City, State & Zip Code Keith D. Weiner & Associates 75 Public Square 4th Floor Last 4 digits of account number On which line in Part 1 did you enter the creditor?			in which line in Fart 1 did you enter th	le creditor?	
Name, Number, Street, City, State & Zip Code Keith D. Weiner & Associates 75 Public Square 4th Floor On which line in Part 1 did you enter the creditor? 2.4 Last 4 digits of account number			ast 4 digits of account number		
Keith D. Weiner & Associates 75 Public Square 4th Floor Last 4 digits of account number	Chardon, OH 44024				
Keith D. Weiner & Associates 75 Public Square 4th Floor Last 4 digits of account number	$\overline{}$				
Keith D. Weiner & Associates 75 Public Square Last 4 digits of account number 4th Floor	Name, Number, Street, City, State &	Zip Code C	on which line in Part 1 did you enter th	ne creditor? 2.4	
4th Floor		tes			
		L	ast 4 digits of account number		

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

page 3 of 3

Fill	in this inforn	nation to identify your cas	se:						
Del	otor 1	Teray L. Mack							
		First Name	Middle Name	Last Name)				
	otor 2	LaStacia N. Mack							
(Spc	ouse if, filing)	First Name	Middle Name	Last Name)				
Uni	ted States Ba	nkruptcy Court for the: N	IORTHERN DISTRICT	OF OHIO					
	se number _								
if kr	nown)								f this is an
								amende	ed filing
e a	s complete and executory cont	I/F: Creditors Who diaccurate as possible. Use P racts or unexpired leases that tory Contracts and Unexpired	art 1 for creditors with P t could result in a claim.	RIORITY claims at Also list executo	nd Part 2 for ry contracts	on Schedule A/B: P	roperty (Of	ficial Forn	n 106A/B) and on
che eft.	edule D: Credit Attach the Con	ors Who Have Claims Secure tinuation Page to this page. Inber (if known).	d by Property. If more sp	ace is needed, co	py the Part	you need, fill it out, r	umber the	entries in	the boxes on the
ar	t 1: List A	II of Your PRIORITY Unse	cured Claims						
	Do any credito	ors have priority unsecured c	laims against you?						
	☐ No. Go to P	art 2.							
	Yes.								
2.	identify what typossible, list the	priority unsecured claims. If oe of claim it is. If a claim has be e claims in alphabetical order a than one creditor holds a partic	oth priority and nonpriority ccording to the creditor's n	amounts, list that o ame. If you have m	laim here an	d show both priority a	nd nonprior	ity amounts	s. As much as
	(For an explana	ation of each type of claim, see	the instructions for this for	m in the instruction	booklet.)				
	, ,	,			,	Total claim	Priority amount		Nonpriority amount
2.1	IRS		Last 4 digits of	account number	XXXXX	\$5,000.00		\$0.00	\$5,000.00
	Priority Cro	editor's Name x 7346	When was the	debt incurred?	2017-20	18			
		Iphia, PA 19101-7346							
		treet City State Zip Code d the debt? Check one.	<u> </u>	you file, the claim	is: Check al	that apply			
	_		☐ Contingent						
	Debtor 1 c	•	☐ Unliquidated						
	■ Debtor 2 o	only	☐ Disputed						
	Debtor 1 a	and Debtor 2 only		ITY unsecured cla	im:				
	At least or	ne of the debtors and another	☐ Domestic su	pport obligations					
	☐ Check if t	his claim is for a community	debt Taxes and c	ertain other debts y	ou owe the o	government			
	Is the claim s	subject to offset?	☐ Claims for d	eath or personal inj	ury while you	were intoxicated			
	No		□ Other Spec	fv					

Delinquent Tax Debt

Official Form 106 E/F

☐ Yes

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 17

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39316

r 2 LaStacia N. Mack		Case numb	er (if known)		
Medina County Dept. of Job and Fam	Last 4 digits of account number	xxxx	\$0.00	\$0.00	\$0.0
Priority Creditor's Name 232 Northland Drive	When was the debt incurred?	2019			
Medina, OH 44256 Number Street City State Zip Code	As of the date you file, the claim	is: Check all tha	it apply		
Who incurred the debt? Check one.	☐ Contingent	is. Oncor an ind	к арргу		
Debtor 1 only	☐ Unliquidated				
Debtor 2 only	_ '				
	Disputed				
Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	ıım:			
$\operatorname{\square}$ At least one of the debtors and another	☐ Domestic support obligations				
☐ Check if this claim is for a community debt	Taxes and certain other debts y	ou owe the gove	ernment		
s the claim subject to offset?	☐ Claims for death or personal inj	ury while you we	re intoxicated		
No	Other. Specify				
Yes	Child supp Notice	ort			
Charry Evilainar	Local A digita of account number	www	\$0.00	\$0.00	* 0
Sherry Evilsizer Priority Creditor's Name	Last 4 digits of account number	XXXX	\$0.00	\$0.00	\$0.0
222 Gaylord Road Lodi, OH 44254	When was the debt incurred?	2019			
Number Street City State Zip Code	As of the date you file, the claim	is: Check all tha	t apply		
Vho incurred the debt? Check one.	☐ Contingent				
Debtor 1 only	☐ Unliquidated				
Debtor 2 only	☐ Disputed				
Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	im:			
☐ At least one of the debtors and another	☐ Domestic support obligations				
☐ Check if this claim is for a community debt	■ Taxes and certain other debts y	ou owo tho gove	rnmont		
s the claim subject to offset?	☐ Claims for death or personal inj	· ·			
No	☐ Other. Specify	ary mino you no	TO INICAIGATOR		
Yes	Child supp	ort			
- List All CV NONDRIODITVII	Notice				
List All of Your NONPRIORITY Unsecu					
No. You have nothing to report in this part. Submit t		schedules.			
Yes.					
st all of your nonpriority unsecured claims in the secured claim, list the creditor separately for each claim.		nat type of claim	it is. Do not list claims al	ready included in Part	t 1. If more

Total claim

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 2 of 17

Debtor Debtor	1 Teray L. Mack 2 LaStacia N. Mack		Case number (if known)	
4.1	18-19 Kenston Middle School	Last 4 digits of account number	xxxx	\$120.00
	Nonpriority Creditor's Name 17425 Snyder Road Chagrin Falls, OH 44023	When was the debt incurred?	2012-2014	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify School fees	3	
4.2	All State Insurance	Last 4 digits of account number	xxxx	\$800.00
	Nonpriority Creditor's Name P.O. Box 660598 Dallas, TX 75266	When was the debt incurred?	2017	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	_	☐ Student loans		
	☐ Check if this claim is for a community debt	_	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	,,	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Insurance	premium deficiency	
4.3	American Family Insurance	Last 4 digits of account number	xxxx	\$300.00
	Nonpriority Creditor's Name 32100 Solon Road #203 Solon, OH 44139	When was the debt incurred?	2017	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Insurance I	Premium Deficiency	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 3 of 17

	Teray L. Mack LaStacia N. Mack		Case number (if known)	
4.4	AT&T Wireless	Last 4 digits of account number	xxxx	\$84.00
	Nonpriority Creditor's Name P.O. Box 1391	When was the debt incurred?	2016	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	<u></u>	☐ Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Phone serv	ice	
4.5	Capital One	Last 4 digits of account number	xxxx	\$442.00
	Nonpriority Creditor's Name P.O. Box 30281 Salt Lake City, UT 84130-0281	When was the debt incurred?	2017	
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit card	purchases	
4.6	Chex Systems, Inc.	Last 4 digits of account number	xxxx	\$0.00
	Nonpriority Creditor's Name 7805 Hudson Road	When was the debt incurred?	2019	
	Suite 100 Saint Paul, MN 55125			
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharir	a plane, and other similar dobte	
	■ No		א פומוים, מווע טנויפו אווווומו עבטנא	
	☐ Yes	Other. Specify Notice		

Schedule E/F: Creditors Who Have Unsecured Claims

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	1 Teray L. Mack 2 LaStacia N. Mack		Case number (if known)	
4.7	Choice Recovery	Last 4 digits of account number	xxxx	\$144.00
	Nonpriority Creditor's Name 1550 Old Henderson Road Ste 100 Columbus, OH 43220	When was the debt incurred?	2014	
-	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Medical Co	llections	
4.8	Cleveland State University Nonpriority Creditor's Name	Last 4 digits of account number	xxxx	\$4,000.00
	2121 Euclid Ave. UC 463	When was the debt incurred?	2014	
-	Cleveland, OH 44115 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Tuition		
4.9	Credit Collection Service Nonpriority Creditor's Name	Last 4 digits of account number	xxxx	\$273.00
	P.O. Box 607	When was the debt incurred?	2019	
-	Norwood, MA 02062 Number Street City State Zip Code	As of the date you file, the claim i	s. Check all that apply	
	Who incurred the debt? Check one.	7.6 or the date you me, the claim.	o. Oncor an that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Collections	for Progressive	

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_
\$2,000.
\$400
\$1,580

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LaStacia N. Mack		Case number (if known)	
First Premier Bank	Last 4 digits of account number	xxxx	\$660.00
Nonpriority Creditor's Name 3820 N. Louise Ave. Sioux Falls, SD 57107-0145	When was the debt incurred?	2016	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	tration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
□ Yes	Other. Specify Credit card	purchases	
First Premier Bank	Last 4 digits of account number	xxxx	\$954.00
Nonpriority Creditor's Name	Last 4 digits of account number		Ψ334.00
3820 N. Louise Ave. Sioux Falls, SD 57107-0145	When was the debt incurred?	2017	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Other. Specify Credit card	purchases	
Geauga County Water Resources	Last 4 digits of account number	2001	\$1,585.00
Nonpriority Creditor's Name 470 Center Road	When was the debt incurred?	2019	
Building 3	when was the debt incurred:	2019	
Chardon, OH 44024			
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
debt		ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
Is the claim subject to offset? No	report as priority claims Debts to pension or profit-sharin	on plans, and other similar debts	

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Dr 2 LaStacia N. Mack		
Geico	Last 4 digits of account number XXXX	\$800.0
Nonpriority Creditor's Name One Geico Plaza	When was the debt incurred? 2017	
Bethesda, MD 20811-0001 Number Street City State Zip Code	As of the date you file the plains in Check all that analy	
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	Пол	
Debtor 2 only	Contingent	
_	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Insurance premium deficiency	
Golden Valley Lending	Last 4 digits of account number XXXX	\$500.0
Nonpriority Creditor's Name 635 East Hwy 20 E Upper Lake, CA 95485	When was the debt incurred? 2019	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify Loan	
Huntington Bank	Last 4 digits of account number XXXX	\$500.0
Nonpriority Creditor's Name 7450 Huntington Park Dr. HZ0308	When was the debt incurred? 2019	
Columbus, OH 43235		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
\square Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Overdraft	

Schedule E/F: Creditors Who Have Unsecured Claims

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LaStacia N. Mack		Case number (if known)	
IC Systems Collections	Last 4 digits of account number	xxxx	\$198.00
Nonpriority Creditor's Name P.O. Box 64378 Saint Paul, MN 55164-0378	When was the debt incurred?	2018	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	□ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□Yes	Other. Specify Medical Co	llections	
Illuminating Company	Last 4 digits of account number	9327	\$1,835.00
Nonpriority Creditor's Name P.O. Box 3687 Akron. OH 44309-3638	When was the debt incurred?	2019	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Utility serv	ice	
Kay Jewelers Nonpriority Creditor's Name	Last 4 digits of account number	xxxx	\$3,218.00
P.O. Box 4485 Beaverton, OR 97076	When was the debt incurred?	2016	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin	ng plans, and other similar debts	
■ No	·	• • • • • • • • • • • • • • • • • • • •	
☐ Yes	Other. Specify Charge acc	count	

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Nationwide Insurance	Last 4 digits of account number	xxxx	\$400.00
Nonpriority Creditor's Name One Nationwide Plaza City Columbus, OH 43215	When was the debt incurred?	2016	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Insurance F	Premium Deficiency	
Northstar Location Services, LLC	Last 4 digits of account number	xxxx	\$220.0
Nonpriority Creditor's Name	_		
Attn: Financial Services Dept. 4285 Genesee Street Buffalo, NY 14225	When was the debt incurred?	2019	
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.			
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharin	51	
Yes	Other. Specify Collections	for Tempoe, LLC	
Ohio First Class Credit Union	Last 4 digits of account number	xxxx	\$478.0
Nonpriority Creditor's Name P.O. Box 5877 Cleveland, OH 44101	When was the debt incurred?	2017	
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
Check if this claim is for a community debt		ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	g plane, and other similar delete	
■ No	Debts to pension or profit-sharin	y pians, and other similar debts	
☐ Yes	Other. Specify Loan		

Schedule E/F: Creditors Who Have Unsecured Claims

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LaStacia N. Mack		Case number (if known)	
Plaza Services	Last 4 digits of account number	xxxx	\$795.00
Nonpriority Creditor's Name 110 Hammond Drive Atlanta, GA 30328	When was the debt incurred?	2017	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other Specify Collections	s for Cashland	
PNC	Last 4 digits of account number	xxxx	\$200.00
Nonpriority Creditor's Name			Ψ200.00
2730 Liberty Ave. Pittsburgh, PA 15222	When was the debt incurred?	2000s	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	<u>_</u>		
Debtor 1 only	Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify Overdraft		
Pro Model & Talent	Last 4 digits of account number	xxxx	\$1,000.00
Nonpriority Creditor's Name 3421 Ridgewood Road	When was the debt incurred?	2018	V 1,000100
Akron, OH 44333	_		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	

Schedule E/F: Creditors Who Have Unsecured Claims

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Progressive Leasing	Last 4 digits of account number	xxxx	\$1,220.00
Nonpriority Creditor's Name 256 Data Drive Draper, UT 84020	When was the debt incurred?	2018	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□Yes	■ Other. Specify Charge acc	count	
Public Storage	Last 4 digits of account number	xxxx	\$109.00
Nonpriority Creditor's Name 22800 Miles Road	When was the debt incurred?	2017	
Cleveland, OH 44128 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□ Yes	Other. Specify Rental Fee	s	
Redrock Financial Nonpriority Creditor's Name	Last 4 digits of account number	xxxx	\$7,754.00
24110 Lorain Road North Olmsted, OH 44070	When was the debt incurred?	2016	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify Judgment		

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Sprint	Last 4 digits of account number	xxxx	\$1,170.0
Nonpriority Creditor's Name KSOPHT0101-Z4300		2018	
6391 Sprint Parkway			
Overland Park, KS 66251-4300 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	710 of the date you me, the claim	or check an that apply	
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	- '		
☐ Check if this claim is for a community	☐ Student loans	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Phone serv	rice	
T-Mobile	Lost 4 digits of account number	xxxx	\$1,234.0
Nonpriority Creditor's Name	Last 4 digits of account number		Ψ1,234.0
P.O. Box 742596 Cincinnati, OH 45274-2596	When was the debt incurred?	2017	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:		
☐ At least one of the debtors and another☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing plans, and other similar debts		
□ Yes	Other Specify Phone serv	•	
Terminix Nonpriority Creditor's Name	Last 4 digits of account number	XXXX	\$200.0
17515 Engle Lake Drive Ste A Cleveland, OH 44130	When was the debt incurred?	2017	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	Unliquidated		
■ Debtor 1 and Debtor 2 only	Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans		
☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	ng plans, and other similar debts	
□ Yes	■ Other. Specify Exterminator fees		

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The Metrohealth System	Last 4 digits of account number	xxxx	\$150.00
Nonpriority Creditor's Name P.O. Box 931703	When was the debt incurred?	2019	
Cleveland, OH 44193 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□ Yes	Other. Specify Medical Se	rvice	
Time Warner Cable	Last 4 digits of account number	xxxx	\$170.00
Nonpriority Creditor's Name P.O. Box 0901	When was the debt incurred?	2019	
Carol Stream, IL 60132 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□ Yes	Other. Specify Cable TV		
US Bank	Last 4 digits of account number	xxxx	\$300.00
Nonpriority Creditor's Name P.O. Box 108	When was the debt incurred?	2000s	
Saint Louis, MO 63166 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	,		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	_ '		
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
□Yes	■ Other. Specify Overdraft		

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	Debtor 1 Teray L. Mack Debtor 2 LaStacia N. Mack Case number (if known)			
4.3	Waste Management	Last 4 digits of account number	4622	\$196.42
	Nonpriority Creditor's Name P.O. Box 9001797 Louisville, KY 40290-1797	When was the debt incurred?	2019	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
debt	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	□Yes	Other. Specify Waste remo	oval	
4.3	We Fix Money Nonpriority Creditor's Name	Last 4 digits of account number	xxxx	\$1,000.00
	9435 Lorton Market Street Suite 762	When was the debt incurred?	2018	
	Lorton, VA 22079 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Loan		
4.3	Why Not Lease It	Last 4 digits of account number	xxxx	\$500.00
	Nonpriority Creditor's Name 4540 Cooper Road Ste 305	When was the debt incurred?	2018	
	Cincinnati, OH 45242 Number Street City State Zip Code		er Charland that are the	
	Who incurred the debt? Check one.	As of the date you file, the claim i	5. Спеск ан тат арру	
	Debtor 1 only	O continuent		
	Debtor 2 only	☐ Contingent☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	'		
		☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	A reast one of the debtors and another			
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify Loan		

Part 3: List Others to Be Notified About a Debt That You Already Listed

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 15 of 17

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Debtor 1 Teray L. Mack Debtor 2 LaStacia N. Mack	Case number (if known)
Name and Address Attorney General of the U.S. U.S. Dept. of Justice Tax Division Civil Trial Section, Northern Reg. P.O. Box 55, Ben Franklin Station Washington, DC 20044	On which entry in Part 1 or Part 2 did you list the original creditor? Line 2.1 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
Name and Address Cleveland Municipal Court 1200 Ontario Street Attn: Clerk of Courts -Garnishment Cleveland, OH 44113	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.30 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Craig W Relman, Esq 23811 Chagrin Blvd, Ste 160	Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.30 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Beachwood, OH 44122	Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
Name and Address Enhanced Recovery P.O. Box 57547 Jacksonville, FL 32241	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.31 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
Name and Address Ferrallgas P.O. Box 1003 Liberty, MO 64069	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.11 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
Name and Address First Credit Corporation P.O. Box 9300 Boulder, CO 80301-9300	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.12 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
Name and Address Huntington Bank P.O. Box 1558 Dept EA1W888 Columbus, OH 43216	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.18 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
Name and Address Internal Revenue Service Insolvency Group 6 1240 East Ninth Street, Room 493 Cleveland, OH 44199	On which entry in Part 1 or Part 2 did you list the original creditor? Line 2.1 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
Name and Address Office of the Ohio Attorney General 150 E. Gay St. Columbus, OH 43215-3191	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.10 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
Name and Address Office of the U.S. Attorney Attn: Bankruptcy Section Carl B. Stokes U.S. Courthouse 801 West Superior Ave., Suite 400 Cleveland, OH 44113	On which entry in Part 1 or Part 2 did you list the original creditor? Line 2.1 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

Schedule E/F: Creditors Who Have Unsecured Claims

Page 16 of 17

Official Form 106 E/F

Deptor 1	reray L. Wack		
Debtor 2	LaStacia N. Mack	Case number (if known)	

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				-	Total Claim
T. ()	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	5,000.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	5,000.00
				-	Total Claim
Total	6f.	Student loans	6f.	\$	0.00
claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	37,489.42
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	37,489.42

Fill in this inform	mation to identify your	case:		
Debtor 1	Teray L. Mack			
	First Name	Middle Name	Last Name	
Debtor 2	LaStacia N. Mack			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	NORTHERN DISTRICT	OF OHIO	
Case number _				☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the r, Street, City, State and ZIP	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3	Oity		Oldio	211 0000	
0	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.5	,		3.0.0	1340	
	Name				_
	Number	Street			
	City		State	ZIP Code	_

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Page 1 of 1

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Fill in this	s information to identify your	case:			
Debtor 1	Teray L. Mack				
D 1 4 6	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fili	ing) LaStacia N. Mack	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO		
Case num	nber				☐ Check if this is an
					amended filing
Officia	l Form 106H				
	dule H: Your Cod	ebtors			12/15
No Yes 2. With Arizon No Yes 3. In Col	thin the last 8 years, have you na, California, Idaho, Louisiana, Go to line 3. S. Did your spouse, former spoulumn 1, list all of your codebte	lived in a community p Nevada, New Mexico, Pu use, or legal equivalent liv ors. Do not include you	roperty state or territory uerto Rico, Texas, Washi e with you at the time?	y? (Community property ngton, and Wisconsin.)	states and territories include g with you. List the person shown
Form					Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and ZI	P Code		Column 2: The cre Check all schedule	ditor to whom you owe the debt s that apply:
3.1				☐ Schedule D, line	e
	Name			☐ Schedule E/F, li	
-	Number Street			_	
	City	State	ZIP Code		
3.2				☐ Schedule D, line	9
	Name			□ Schedule E/F, li	ne
				☐ Schedule G, line	e
-	Number Street	State	ZIP Code	_	
	City	State	ZIP Code		

Fill in this information	to identify your case:	
Debtor 1	Teray L. Mack	_
Debtor 2 (Spouse, if filing)	LaStacia N. Mack	-
United States Bankru	ptcy Court for the: NORTHERN DISTRICT OF OHIO	_
Case number (If known)		Check if this is:
,		☐ An amended filing ☐ A supplement showing postpetition chapter 13 income as of the following date:
Official Form	<u> 1061</u>	MM / DD/ YYYY
Schedule I:	Your Income	12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Describe Employment Fill in your employment Debtor 1 Debtor 2 or non-filing spouse information. Employed Employed If you have more than one job, **Employment status** attach a separate page with ■ Not employed ■ Not employed information about additional employers. Occupation **Foreman Eligibility Specialist** Include part-time, seasonal, or **Employer's name Davey Tree Expert Company Cuyahoga County** self-employed work. **Employer's address** Occupation may include student 1500 N. Mantua Street 3955 Euclid Avenue or homemaker, if it applies. Kent, OH 44240 Cleveland, OH 44114 How long employed there? 7 months 9 years

Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 0.00 3.553.33 deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. 0.00 +\$ 0.00 3. Calculate gross Income. Add line 2 + line 3. 3,553.33 \$ 0.00

Official Form 106I Schedule I: Your Income page 1

Case number (if known)

				For	Debtor 1		ebtor 2 or iling spouse
	Сор	y line 4 here	4.	\$	3,553.33	\$	0.00
_							
5.		all payroll deductions:	_	•		•	
	5a. 5b.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans	5a. 5b.	\$	688.96	\$	0.00
	5c.	Voluntary contributions for retirement plans	50. 5c.	\$ 	0.00	\$ 	0.00
	5d.	Required repayments of retirement fund loans	5d.	\$ 	0.00	\$ —	0.00
	5e.	Insurance	5a. 5e.	\$ 	5.29	\$ 	0.00
	5f.	Domestic support obligations	5f.	\$—	303.98	\$	0.00
	5g.	Union dues	5g.	\$-	0.00	\$	0.00
	5h.	Other deductions. Specify:	5h.+	\$	0.00	· ·	0.00
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.	\$	998.23	\$	0.00
7.		sulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,555.10	\$	0.00
8.		all other income regularly received:		· —		· —	
0.	8a.	Net income from rental property and from operating a business,					
		profession, or farm					
		Attach a statement for each property and business showing gross					
		receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	œ	0.00	\$	0.00
	8b.	Interest and dividends	8b.	\$ 	0.00	\$ 	0.00
	8c.	Family support payments that you, a non-filing spouse, or a dependent		Ψ	0.00	Ψ	0.00
	00.	regularly receive					
		Include alimony, spousal support, child support, maintenance, divorce					
		settlement, and property settlement.	8c.	\$	0.00	\$	380.40
	8d.	Unemployment compensation	8d.	\$	0.00	\$	0.00
	8e.	Social Security	8e.	\$	0.00	\$	0.00
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance					
		that you receive, such as food stamps (benefits under the Supplemental					
		Nutrition Assistance Program) or housing subsidies.					
		Specify:	8f.	\$	0.00	\$	0.00
	8g.	Pension or retirement income	8g.	\$	0.00	\$	0.00
	8h.	Other monthly income. Specify: Short Term Disability	_ 8h.+	\$	0.00	+ \$	1,000.00
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	1,380.40
		· ·	L				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
10	Calc	culate monthly income. Add line 7 + line 9.	10. \$	-	2,555.10 + \$	1 20	0.40 = \$ 3,935.50
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	ΙΟ. Ψ -		.,555.10	1,30	- Ψ
4.4		3 1					
11.		e all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your		lante	vour roommates	and	
		r friends or relatives.	аороно	iorito,	your roommates	, and	
	Do n	ot include any amounts already included in lines 2-10 or amounts that are not a	availabl	e to pa	ay expenses liste	ed in <i>Sci</i>	hedule J.
	Spec	cify:					11. + \$ 0.00
40	A -1 -1	the amount in the last column of line 40 to the amount in line 44. The amount in line 44.	and and		la Cara and I and a second below Car		
12.		the amount in the last column of line 10 to the amount in line 11. The residue that amount on the Summary of Schedules and Statistical Summary of Certain					
	appli		II LIADIII	inos ai	na related Data,	, 11 10	12. \$ 3,935.50
	• •						Combined
							Combined monthly income
13.	Do y	ou expect an increase or decrease within the year after you file this form	?				,
		No.					
		Yes. Explain: Co-debtor is on materinty leave for the next three	mont	hs.	She is waiting	for pri	ivate short term
		disability which will pay \$1000 a month.				•	
				_			
		Debtors will have child care cost of approximatel	ıy \$800) a m	onth once co-	-debtor	returns to work

Fill in	n this information to identify your case:				
Debte	or 1 Teray L. Mack		Check	if this is:	
				an amended filing	
Debte	or 2 LaStacia N. Mack				ving postpetition chapter the following date:
` '				·	
Unite	ed States Bankruptcy Court for the: NORTHERN DISTRICT OF	OHIO	Ņ	MM / DD / YYYY	
Case (If kn	enumber own)				
Of	ficial Form 106J				
	chedule J: Your Expenses				12/1
info	es complete and accurate as possible. If two married peop rmation. If more space is needed, attach another sheet to aber (if known). Answer every question.				
Part					
1.	Is this a joint case?				
	No. Go to line 2.				
	Yes. Does Debtor 2 live in a separate household?				
	■ No □ Yes. Debtor 2 must file Official Form 106J-2, Expe	enses for Separate House	ehold of Debto	or 2.	
2.	Do you have dependents? \square No				
	Do not list Debtor 1 and Debtor 2. Fill out this information each dependent	•		Dependent's age	Does dependent live with you?
	Do not state the	Child		0	□ No
	dependents names.	Child		8 years	■ Yes □ No
		Child		10 years	■ Yes
					□ No
		Child		11 years	Yes
		Obite		44	□ No
		Child		14 years	■ Yes □ No
		Child		Newborn	■ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents? ■ No □ Yes				
expe	2: Estimate Your Ongoing Monthly Expenses mate your expenses as of your bankruptcy filing date unlenses as of a date after the bankruptcy is filed. If this is a licable date.				
	ude expenses paid for with non-cash government assista				
	value of such assistance and have included it on <i>Schedu</i> icial Form 106I.)	le I: Your Income		Your expe	enses
4.	The rental or home ownership expenses for your resider payments and any rent for the ground or lot.	nce. Include first mortgage	e 4. \$		330.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$		233.33
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		200.00
5.	 4d. Homeowner's association or condominium dues Additional mortgage payments for your residence, such 	as home equity loops	4d. \$ 5. \$		0.00
J.	Additional mortgage payments for your residence, Such	as nome equity loans	υ. φ		0.00

Schedule J: Your Expenses

page 1

Official Form 106J

Case number (if known)

	tor 1	Teray L. Mack			
Debtor 2		LaStacia N. Mack	Case num		
6.	Utilit	ies.			
0.	6a.	Electricity, heat, natural gas	6a.	\$	350.00
	6b.	Water, sewer, garbage collection	6b.	\$	175.00
	6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	300.00
	6d.	Other. Specify: Cable/Internet	6d.	·	105.00
7.	Food	I and housekeeping supplies		· -	1,500.00
8.		dcare and children's education costs	8.	\$	0.00
9.		ning, laundry, and dry cleaning	9.	\$	250.00
		onal care products and services	10.	\$	300.00
		cal and dental expenses	11.	·	200.00
		sportation. Include gas, maintenance, bus or train fare.		·	200.00
12.		ot include car payments.	12.	\$	250.00
13.		rtainment, clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
		itable contributions and religious donations	14.	\$	0.00
15.	Insu	rance.			
	Do n	ot include insurance deducted from your pay or included in lines 4 or 20.			
	15a.	Life insurance	15a.	\$	0.00
	15b.	Health insurance	15b.	•	0.00
	15c.	Vehicle insurance	15c.	\$	120.00
	15d.	Other insurance. Specify:	15d.	\$	0.00
16.	Taxe	s. Do not include taxes deducted from your pay or included in lines 4 or 20.			
	Spec	ify:	16.	\$	0.00
17.		Illment or lease payments:			
		Car payments for Vehicle 1	17a.	*	313.28
		Car payments for Vehicle 2	17b.	*	0.00
		Other. Specify:	17c.	· -	0.00
		Other. Specify:	17d.	\$	0.00
18.		payments of alimony, maintenance, and support that you did not report as	10	\$	0.00
40		acted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.		
19.		r payments you make to support others who do not live with you.	10	\$	0.00
20	Spec	r real property expenses not included in lines 4 or 5 of this form or on <i>Sch</i> e	19.	our Incomo	
20.		Mortgages on other property	20a.		0.00
		Real estate taxes	20b.	· : ———	0.00
		Property, homeowner's, or renter's insurance	20c.	·	0.00
		Maintenance, repair, and upkeep expenses	20d.	·	0.00
		Homeowner's association or condominium dues	20u. 20e.	*	
24				Ψ +\$	0.00
۷١.	Otne	r: Specify:		+\$	0.00
22.	Calc	ulate your monthly expenses			
	22a.	Add lines 4 through 21.		\$	4,726.61
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	<u> </u>
		Add line 22a and 22b. The result is your monthly expenses.		\$	4,726.61
		The local to your month, oxponess			4,720.01
23.		ulate your monthly net income.			
		Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	3,935.50
	23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	4,726.61
	23c.	Subtract your monthly expenses from your monthly income.	220	¢	-791.11
		The result is your monthly net income.	23c.	\$	-791.11
24.	For ex	ou expect an increase or decrease in your expenses within the year after you kample, do you expect to finish paying for your car loan within the year or do you expect you ication to the terms of your mortgage?			e or decrease because of a
	☐ Ye	es. Lapiaiii liele.			

Fill in this	s information to identify your	case:		
Debtor 1	Teray L. Mack			
	First Name	Middle Name	Last Name	
Debtor 2	LaStacia N. Mack			
(Spouse if, fili	ing) First Name	Middle Name	Last Name	
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRIC	CT OF OHIO	
Case num	nber			
(if known)				☐ Check if this is an amended filing
Declar If two mark You must to obtaining	ried people are filing togethe	r, both are equally resp le bankruptcy schedul n connection with a ba		
Did y	you pay or agree to pay some	one who is NOT an att	orney to help you fill out bankrup	tcy forms?
	No			
	Yes. Name of person			Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
	r penalty of perjury, I declare hey are true and correct.	that I have read the su	ımmary and schedules filed with t	his declaration and
X /s	s/ Teray L. Mack		X /s/ LaStacia N. Ma	ack
	Teray L. Mack		LaStacia N. Mack	······································
	Signature of Debtor 1		Signature of Debtor 2	
D	Date May 10, 2019		Date May 10, 20	19

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Fill in this in	formation to identify you	r case:			
Debtor 1	Teray L. Mack				
	First Name	Middle Name	Last Name		
Debtor 2	LaStacia N. Mac				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	NORTHERN DISTRICT (OF OHIO		
Case number					
(if known)	-				check if this is an
				a	mended filing
Official F	Form 107				
		Affaire for Individ	duals Eiling for B	onkruptov	4/40
Stateme	nt of Financial	Affairs for Individ	auais Filling for B	ankruptcy	4/19
				equally responsible for sup	
	own). Answer every que		this form. On the top of an	y additional pages, write you	r name and case
, Down / Ot-	on Bodella Aliced Versi Ma		Librard Defense		
Part 1: Given	ve Details About Your Ma	arital Status and Where You	Lived Before		
1. What is y	our current marital statu	ıs?			
.					
■ Mar □ Not					
□ NOI	married				
2. During th	ne last 3 years, have you	lived anywhere other than	where you live now?		
■ N.					
■ No □ Yes	List all of the places you	lived in the last 3 years. Do no	at include where you live new	,	
□ res	. List all of the places you i	ived in the last 3 years. Do no	of include where you live now		
Debtor '	Prior Address:	Dates Debtor 1	Debtor 2 Prior Ac	dress:	Dates Debtor 2
		lived there			lived there
				ity property state or territory	
states and teri	ritories include Arizona, Ca	ilifornia, Idaho, Louisiana, Ne	vada, New Mexico, Puerto R	ico, Texas, Washington and W	isconsin.)
■ No					
_	. Make sure you fill out <i>Sci</i>	hedule H: Your Codebtors (Of	fficial Form 106H).		
	, ,	(1	,		
Part 2 Ex	plain the Sources of You	ır Income			
4					
		nployment or from operating the received from all jobs and a		ear or the two previous caler time activities.	idar years?
		have income that you receive			
□ No					
_	Fill in the details				
■ Yes	. Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income	Gross income	Sources of income	Gross income
		Check all that apply.	(before deductions and	Check all that apply.	(before deductions
			exclusions)		and exclusions)
	y 1 of current year until filed for bankruptcy:	■ Wages, commissions,	\$15,941.43	■ Wages, commissions,	\$15,033.14
tile date you	med for bankruptcy:	bonuses, tips		bonuses, tips	
		☐ Operating a business		☐ Operating a business	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

	Debtor 1		Debtor 2			
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)		
For last calendar year: (January 1 to December 31, 2018)	■ Wages, commissions, bonuses, tips	\$23,412.00	■ Wages, commissions bonuses, tips	\$36,244.00		
	☐ Operating a business		☐ Operating a business	;		
For the calendar year before that: (January 1 to December 31, 2017)	■ Wages, commissions, bonuses, tips	\$23,000.00	■ Wages, commissions bonuses, tips	\$36,000.00		
	☐ Operating a business		☐ Operating a business	;		
 Did you receive any other incom Include income regardless of whet and other public benefit payments; winnings. If you are filing a joint ca List each source and the gross inc No Yes. Fill in the details. 	her that income is taxable. Exa pensions; rental income; inter se and you have income that y	amples of other income are all rest; dividends; money collect you received together, list it o	ed from lawsuits; royalties nly once under Debtor 1.			
	Debtor 1		Debtor 2			
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)		
Part 3: List Certain Payments You	ı Made Before You Filed for ∣	Bankruptcy				
Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more? No. Go to line 7. Yes List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?						
include pay	7. each creditor to whom you pai yments for domestic support ol r this bankruptcy case.					
Creditor's Name and Address	Dates of payme	ent Total amount	Amount you Was th	nis payment for		

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor Debtor	•		Cas	e number (if known)		
<i>Ins</i> of a b	siders include your relatives; any general pa which you are an officer, director, person in	artners; relatives of any ger control, or owner of 20% of	neral partners; partne or more of their voting	erships of which you	ou are a genera ny managing a	al partner; corporations agent, including one for
	No					
In	nsider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
ins	ithin 1 year before you filed for bankruptosider? clude payments on debts guaranteed or cos		ments or transfer a	ny property on a	ccount of a d	ebt that benefited an
	l No					
	Yes. List all payments to an insider					
In	nsider's Name and Address	Dates of payment	Total amount paid	Amount you still owe		
Part 4:	Identify Legal Actions, Repossession	ns and Foreclosures				
		,	paid still owe tu make any payments or transfer any property on account of a debt that benefited an an insider. If payment Total amount paid Total amount you paid Still owe Include creditor's name Total amount paid Still owe Include creditor's name Include creditor			
Lis						
	l No					
	Yes. Fill in the details.					
_	case title case number	Nature of the case	Court or agency		Status of th	ne case
M	Sterling Jewelers Inc. vs. Teray Mack 8CJ000316	Civil	Common Pleas 100 Short Cour	t Street	☐ On appe	eal
	Redrock Financial vs. Teray Mack 016CVF000305	Civil	Common Pleas 100 Short Cour	t Street	☐ On appe	eal
	neck all that apply and fill in the details below		erty repossessed, f	oreclosed, garnis	shed, attached	d, seized, or levied?
C	reditor Name and Address	Describe the Property		Date		Value of the
		Fundain what hannana	_1			property
	Redrock Financial			2019		\$0.00
	4110 Lorain Road Iorth Olmsted, OH 44070	☐ Property was reposse	essed.			
		☐ Property was foreclos				
		■ Property was garnish				
		☐ Property was attache	ed. seized or levied			
		i Toperty was attache	a, seizeu oi ievieu.			

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	btor 1 Teray L. Mack btor 2 LaStacia N. Mack	Case number ((if known)	
11.	Within 90 days before you filed for bankrupt accounts or refuse to make a payment became No	ry, did any creditor, including a bank or financial ins se you owed a debt?	titution, set off any amounts from you	•
	Yes. Fill in the details.			
	Creditor Name and Address	Describe the action the creditor took	Date action was Amou taken	nt
12.	Within 1 year before you filed for bankruptcy court-appointed receiver, a custodian, or an are No ☐ Yes	, was any of your property in the possession of an a ther official?	ssignee for the benefit of creditors, a	
Par	tt 5: List Certain Gifts and Contributions			_
13.	Within 2 years before you filed for bankrupto ■ No □ Yes. Fill in the details for each gift. Gifts with a total value of more than \$600	y, did you give any gifts with a total value of more th Describe the gifts	nan \$600 per person? Dates you gave Val	110
	per person Person to Whom You Gave the Gift and Address:	Describe the gilts	the gifts	Je
14.	Within 2 years before you filed for bankrupto No Yes. Fill in the details for each gift or contr	y, did you give any gifts or contributions with a total oution.	I value of more than \$600 to any charit	y?
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you Value Contributed	пe
Par	rt 6: List Certain Losses			
15.		or since you filed for bankruptcy, did you lose anytl	hing because of theft, fire, other disast	er,
	Yes. Fill in the details.			
	Describe the property you lost and how the loss occurred	cribe any insurance coverage for the loss ude the amount that insurance has paid. List pending rance claims on line 33 of Schedule A/B: Property.	Date of your Value of proper loss Id	rty
Par	t 7: List Certain Payments or Transfers			_
16.	consulted about seeking bankruptcy or prep	did you or anyone else acting on your behalf pay of aring a bankruptcy petition? rers, or credit counseling agencies for services required		
	□ No ■ Yes. Fill in the details.			
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment Amount or transfer was payme made	
	Borders & Gerace LLC 3401 Enterprise Parkway Suite 340 Beachwood, OH 44122 kblaw123@gmail.com	Chapter 7 Bankruptcy	5/2019 \$950.0)0

Statement of Financial Affairs for Individuals Filing for Bankruptcy

7.	Within 1 year before you filed for bankruptcy, d promised to help you deal with your creditors of Do not include any payment or transfer that you lis	or to make payments			or transfer any proper	ty to anyone who
	■ No					
	☐ Yes. Fill in the details.					
	Person Who Was Paid Address	Description and vertransferred	alue of any prop	erty	Date payment or transfer was made	Amount of payment
8.	Within 2 years before you filed for bankruptcy, transferred in the ordinary course of your busin Include both outright transfers and transfers made include gifts and transfers that you have already list. No	ness or financial affa as security (such as tl	irs? ne granting of a s			
	Yes. Fill in the details.					
	Person Who Received Transfer Address	Description and vo			any property or s received or debts schange	Date transfer was made
	Person's relationship to you					
19.	Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protect No		y property to a s	elf-settled tr	ust or similar device o	of which you are a
	Yes. Fill in the details.					
	Name of trust	Description and va	alue of the prop	erty transfer	red	Date Transfer was made
Par	t 8: List of Certain Financial Accounts, Instru	ments, Safe Deposit	Boxes, and Sto	rage Units		
20.	Within 1 year before you filed for bankruptcy, we sold, moved, or transferred? Include checking, savings, money market, or of houses, pension funds, cooperatives, association.	ther financial accour	nts; certificates o	of deposit; sl		
	Yes. Fill in the details.					
		est 4 digits of ecount number	Type of accour	cle	ate account was osed, sold, oved, or ansferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 year cash, or other valuables?	r before you filed for	bankruptcy, any	/ safe deposi	it box or other deposi	tory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had accommodates (Number, State and ZIP Code)		Describe the	contents	Do you still have it?
22.	Have you stored property in a storage unit or p	lace other than your	home within 1 y	ear before y	ou filed for bankruptc	y?
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility	Who else has or h	ad access	Describe the	contents	Do you still
	Address (Number, Street, City, State and ZIP Code)	to it? Address (Number, State and ZIP Code)		Describe tile	Contents	have it?

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Pai	t 9: Identify Property You Hold or Control for	Someone Else			
23.	Do you hold or control any property that someofor someone.	one else owns? Include any prope	rty you b	porrowed from, are storing for	, or hold in trust
	No				
	Yes. Fill in the details.				
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Descri	be the property	Value
Pai	t 10: Give Details About Environmental Information	ation			
For	the purpose of Part 10, the following definitions	apply:			
•	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these substances.	ir, land, soil, surface water, groun bstances, wastes, or material.	dwater,	or other medium, including st	atutes or
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	_	law, wh	ether you now own, operate, o	or utilize it or used
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or		s waste,	hazardous substance, toxic s	substance,
Rep	ort all notices, releases, and proceedings that ye	ou know about, regardless of whe	n they o	ccurred.	
24.	Has any governmental unit notified you that you	u may be liable or potentially liable	e under o	or in violation of an environme	ental law?
	■ No				
	☐ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)		vironmental law, if you ow it	Date of notice
25.	Have you notified any governmental unit of any	release of hazardous material?			
	■ No □ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)		vironmental law, if you ow it	Date of notice
26.	Have you been a party in any judicial or adminis	strative proceeding under any env	rironmen	tal law? Include settlements a	and orders.
	■ No □ Yes. Fill in the details.				
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature	of the case	Status of the case
Pai	t 11: Give Details About Your Business or Con	nections to Any Business			
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have a	ny of the	following connections to any	business?
	☐ A sole proprietor or self-employed in a	trade, profession, or other activity	, either f	ull-time or part-time	
	☐ A member of a limited liability company	(LLC) or limited liability partnersh	nip (LLP)		
	☐ A partner in a partnership				
	☐ An officer, director, or managing execu	tive of a corporation			
	☐ An owner of at least 5% of the voting or	equity securities of a corporation	ı		

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	otor 1 Teray L. Mack totor 2 LaStacia N. Mack			Case number (if known)
	■ No. None of the above applies. Go to □ Yes. Check all that apply above and fil		elow for each business.	
	Business Name Address (Number, Street, City, State and ZIP Code)		ature of the business	Employer Identification number Do not include Social Security number or ITIN. Dates business existed
28.	Within 2 years before you filed for bankrup institutions, creditors, or other parties. ■ No □ Yes. Fill in the details below.	otcy, did you give	a financial statement to	anyone about your business? Include all financial
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued		
ha are vith		a false statement,	concealing property, o	I I declare under penalty of perjury that the answers robtaining money or property by fraud in connection years, or both.
/s/	Teray L. Mack	/s/ La	Stacia N. Mack	
	ray L. Mack	LaSta	cia N. Mack	
Sig	nature of Debtor 1	Signat	ure of Debtor 2	
Dat	te <u>May 10, 2019</u>	Date	May 10, 2019	
Did ■ N		ent of Financial A	Affairs for Individuals Fi	ling for Bankruptcy (Official Form 107)?
I N		·		
」 ⅓	es. Name of Person Attach the Bankro	uptcy Petition Prep	parer's Notice, Declaration	n, and Signature (Official Form 119).

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 7

				_
Fill in this inform	nation to identify your c	ase:		
Debtor 1	Teray L. Mack			1
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	LaStacia N. Mack First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	NORTHERN DIST	TRICT OF OHIO	
Case number				
(if known)				☐ Check if this is an amended filing
				-
~				
Official Fo	rm 108			
Statemen	t of Intention	า for Indiv	iduals Filing Under Chapt	er 7
f you are an indi	vidual filing under chap	ter 7, you must fil	out this form if:	
creditors have	claims secured by you	r property, or		
	ed personal property ar			
	ver is earlier, unless the		you file your bankruptcy petition or by the date set ime for cause. You must also send copies to t	
	ople are filing together d date the form.	in a joint case, bo	th are equally responsible for supplying correct	information. Both debtors must
•	nd accurate as possible our name and case num	•	needed, attach a separate sheet to this form. O	n the top of any additional pages,
Part 1: List Yo	ur Creditors Who Have	Secured Claims		
1. For any credito information be	•	rt 1 of Schedule D	: Creditors Who Have Claims Secured by Proper	ty (Official Form 106D), fill in the
Identify the cre	ditor and the property th	at is collateral	What do you intend to do with the property the secures a debt?	at Did you claim the property as exempt on Schedule C?
				2.5 5.0
Creditor's C	apital One Auto Fina	nce	Currender the property	
name:	apitai Olie Auto Filiai	IICE	☐ Surrender the property. ☐ Retain the property and redeem it.	■ No
Description of	2006 Honda Pilot 11	20.000	Retain the property and enter into a	□ Yes
DOGGINGION UI	ZOOD DONGA PROT 1.			

Reaffirmation Agreement. miles property ☐ Retain the property and [explain]: **Debtor's Possession** securing debt: Creditor's **Geuaga County Treasurer** ☐ Surrender the property. ■ No name: ☐ Retain the property and redeem it. ☐ Yes Retain the property and enter into a Description of 16750 Akron Street Chagrin Reaffirmation Agreement. Falls, OH 44023 Geauga County property ☐ Retain the property and [explain]: **Debtors' Residence** securing debt: PPN#s: 02-30110, 02-301200, 02-301300, 02-301400, 02-301500 Legal Description: S/L 366^CHAGRIN FALLS PARK SUB, S/L 367^CHAGRIN FALLS

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 1

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PARK SUB, S/L 368^CHAGR

	y L. Mack acia N. Mack	Case number (if kno	own)
Creditor's Rename: Description of property securing debt:	obert L. Reynolds 16750 Akron Street Chagrin Falls, OH 44023 Geauga County Debtors' Residence PPN#s: 02-30110, 02-301200, 02-301300, 02-301400,	 □ Surrender the property. □ Retain the property and redeem it. ■ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	■ No □ Yes
	02-301500 Legal Description: S/L 366^CHAGRIN FALLS PARK SUB, S/L 367^CHAGRIN FALLS PARK SUB, S/L 368^CHAGR		

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases	Will the lease be assumed?
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased	☐ Yes ☐ No
Property:	☐ Yes
Lessor's name: Description of leased Property:	□ No □ Yes
Lessor's name: Description of leased Property:	□ No □ Yes
Lessor's name: Description of leased Property:	□ No □ Yes
Lessor's name: Description of leased Property:	□ No □ Yes
Lessor's name: Description of leased Property:	□ No □ Yes
Part 3: Sign Below	

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

Official Form 108 Statement of Intention for Individuals Filing Under Chapter 7

page 2

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	btor 1 Teray L. Mack btor 2 LaStacia N. Mack	Case number (if known)
Χ	/s/ Teray L. Mack	χ /s/ LaStacia N. Mack
	Teray L. Mack	LaStacia N. Mack
	Signature of Debtor 1	Signature of Debtor 2
	Date May 10, 2019	Date May 10, 2019

Statement of Intention for Individuals Filing Under Chapter 7

12	eck or 2A-1S		irected	in this form and in	Form
Debtor 1 Teray L. Mack	_,	арр.			
Debtor 2 (Spouse, if filing) LaStacia N. Mack	■ 1. T	here is no pres	umption	n of abuse	
			nade ur	mine if a presumpti nder <i>Chapter 7 Mea</i> rm 122A-2).	
				ot apply now becau	
	☐ Ch	eck if this is a	n ame	nded filina	
Official Form 122A - 1				g	
	m	•			4044
Chapter 7 Statement of Your Current Monthly Inc	OIII	e			12/15
attach a separate sheet to this form. Include the line number to which the additional information case number (if known). If you believe that you are exempted from a presumption of abuse becau qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Part 1: Calculate Your Current Monthly Income	ise you	do not have prin	narily co	onsumer debts or be	ecause of
What is your marital and filing status? Check one only.					
□ Not married. Fill out Column A, lines 2-11.					
■ Married and your spouse is filing with you. Fill out both Columns A and B, lines	2-11.				
☐ Married and your spouse is NOT filing with you. You and your spouse are:					
☐ Living in the same household and are not legally separated. Fill out both Co	lumns	A and B, lines 2	2-11.		
☐ Living separately or are legally separated. Fill out Column A, lines 2-11; do not penalty of perjury that you and your spouse are legally separated under nonbar living apart for reasons that do not include evading the Means Test requirement	nkrupto	y law that applie	es or th		
Fill in the average monthly income that you received from all sources, derived during the 6 fu 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 thro the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not inclu spouses own the same rental property, put the income from that property in one column only. If you have	ugh Aud de any i	gust 31. If the amoint m	ount of your	our monthly income va once. For example, it	aried during f both
	Colui Debte			mn B or 2 or filing spouse	
2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$	4,275.22	\$	3,709.75	
3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	\$	0.00	\$	0.00	
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	\$	0.00	\$	382.04	

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

Debtor 1

Debtor 1 0.00

0.00 Copy here -> \$

0.00 Copy here -> \$

0.00

0.00

0.00

0.00

0.00

0.00

\$

-\$

\$

-\$

page 1

Best Case Bankruptcy

0.00

0.00

0.00

5. Net income from operating a business, profession, or farm

Net monthly income from a business, profession, or farm \$

Gross receipts (before all deductions)

Gross receipts (before all deductions)

7. Interest, dividends, and royalties

Ordinary and necessary operating expenses

6. Net income from rental and other real property

Ordinary and necessary operating expenses

Net monthly income from rental or other real property

Case number (if known)

				Column A Debtor 1		Column B Debtor 2 or non-filing s	
8.	Unemployment compensation			\$	0.00	\$	0.00
	Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:	received was a ber	nefit under				
	For you \$		0.00				
	For your spouse \$		0.00				
9.	Pension or retirement income. Do not include any am benefit under the Social Security Act.	ount received that v	vas a	\$	0.00	\$	0.00
10.	Income from all other sources not listed above. Sper Do not include any benefits received under the Social S received as a victim of a war crime, a crime against hum domestic terrorism. If necessary, list other sources on a total below.	ecurity Act or paym nanity, or internatior separate page and	ents nal or	\$	0.00	<u> </u>	0.00
	·			\$	0.00	\$	0.00
	Total amounts from separate pages, if any.			\$	0.00	\$	0.00
				<u> </u>		<u> </u>	1
11.	Calculate your total current monthly income. Add line each column. Then add the total for Column A to the tot		\$	4,275.22	+ -	4,091.79	= \$ <u>8,367.01</u>
							Total current monthly income
Part	2: Determine Whether the Means Test Applies to	You					
12.	Calculate your current monthly income for the year.	Follow these steps	<u>.</u>				
	12a. Copy your total current monthly income from line 1	1		Сору	y line 11	here=>	\$ 8,367.01
	Multiply by 12 (the number of months in a year)						x 12
						10h	100 101 10
	12b. The result is your annual income for this part of the	HOITI				12b	. \$ 100,404.12
13.	Calculate the median family income that applies to y	ou. Follow these st	eps:				
	Fill in the state in which you live.	ОН					
	Fill in the number of people in your household.	7					
	Fill in the median family income for your state and size of	of household.				13.	\$ 116,454.00
	To find a list of applicable median income amounts, go of for this form. This list may also be available at the bankr			in the separa	ate instruc	ctions	
14.	How do the lines compare?						
	14a. Line 12b is less than or equal to line 13. Or Go to Part 3.	the top of page 1,	check box	1, There is i	no presun	nption of abus	e.
	14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	f page 1, check box	2, The pre	esumption of	abuse is	determined by	y Form 122A-2.
Part	3: Sign Below						
	By signing here, I declare under penalty of perjury	that the information	on this sta	tement and	in any att	achments is tr	ue and correct.
	χ /s/ Teray L. Mack	х	/s/ LaSt	acia N. Ma	ck		
	Teray L. Mack			a N. Mack			
	Signature of Debtor 1		J	of Debtor 2			
	Date May 10, 2019 MM / DD / YYYY	Date	May 10,				
	If you checked line 14a, do NOT fill out or file Form	122A-2	IVIIVI / DD	/ 1111			
	If you checked line 14b, fill out Form 122A-2 and fil	e il wilh this form.					

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

page 2

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Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 11/01/2018 to 04/30/2019.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Davey Tree Expert Company

Year-to-Date Income:

Last Year:

Debtor 1

Debtor 2

Starting Year-to-Date Income: **\$0.00** from check dated **10/31/2018**. Ending Year-to-Date Income: **\$9,709.89** from check dated **12/31/2018**.

This Year:

Current Year-to-Date Income: \$15,941.43 from check dated 4/30/2019 .

Income for six-month period (Current+(Ending-Starting)): \$25,651.32.

Average Monthly Income: **\$4,275.22**.

Case number ((if known)		

Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period 11/01/2018 to 04/30/2019.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Cuyahoga County

Year-to-Date Income:

Last Year:

Starting Year-to-Date Income: \$37,870.01 from check dated 10/31/2018. Ending Year-to-Date Income: \$47,012.63 from check dated 12/31/2018.

This Year:

Current Year-to-Date Income: \$_\$13,115.90 from check dated __4/30/2019 .

Income for six-month period (Current+(Ending-Starting)): \$22,258.52.

Average Monthly Income: \$3,709.75.

Line 4 - Child support income (including foster care and disability)

Source of Income: **Child Support**Constant income of **\$382.04** per month.

Official Form 122A-1

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
<u>+</u> \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
_	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

United States Bankruptcy Court Northern District of Ohio

In re	Teray L. Mack LaStacia N. Mack		Case No.		
111 10	Lastacia N. IWack	Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPE	ENSATION OF ATTO	-	EBTOR(S)	
cc	arsuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 201 empensation paid to me within one year before the filiple rendered on behalf of the debtor(s) in contemplation	6(b), I certify that I am the attoring of the petition in bankruptcy	ney for the above na , or agreed to be paid	med debtor(s) and tha	
	For legal services, I have agreed to accept		\$	950.00	
	Prior to the filing of this statement I have received	<u> </u>	\$	950.00	
	Balance Due			0.00	
2. \$_	335.00 of the filing fee has been paid.				
3. Tl	ne source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
l. Ti	ne source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
i. ■	I have not agreed to share the above-disclosed com	pensation with any other person	unless they are men	nbers and associates of	f my law firm.
	I have agreed to share the above-disclosed compen copy of the agreement, together with a list of the na				law firm. A
5. Ir	return for the above-disclosed fee, I have agreed to	render legal service for all aspec	ts of the bankruptcy	case, including:	
b. с.	Analysis of the debtor's financial situation, and rend Preparation and filing of any petition, schedules, sta Representation of the debtor at the meeting of credi [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and applicati 522(f)(2)(A) for avoidance of liens on he	atement of affairs and plan which tors and confirmation hearing, a reduce to market value; ex tons as needed; preparation	h may be required; nd any adjourned he emption planning	arings thereof;	filing of
. B	y agreement with the debtor(s), the above-disclosed for Representation of the debtors in any disany other adversary proceeding.			ces, relief from sta	y actions or
		CERTIFICATION			
	certify that the foregoing is a complete statement of an arrange proceeding.	ny agreement or arrangement fo	r payment to me for	representation of the	debtor(s) in
Ма	y 10, 2019	/s/ Keith L. Bord	ers		
Da	te	Keith L. Borders Signature of Attorn			
		Borders & Gerad	e LLC		
		3401 Enterprise	Parkway		
		Suite 340 Beachwood, OH	44122		
		216-766-5704 Fa	ax: 216-766-5708		
		kblaw123@gmai Name of law firm	i.com		

United States Bankruptcy Court Northern District of Ohio

In re	Teray L. Mack LaStacia N. Mack		Case No.	
	Luotaola IV. Illaok	Debtor(s)	Chapter 7	
	VER	RIFICATION OF CREDITOR	MATRIX	
The ab	ove-named Debtors hereby verify	that the attached list of creditors is true and o	correct to the best of the	ir knowledge.
Date:	May 10, 2019	/s/ Teray L. Mack		
		Teray L. Mack		
		Signature of Debtor		
Date:	May 10, 2019	/s/ LaStacia N. Mack		
		LaStacia N. Mack		
		Signature of Debtor		

18-19 Kenston Middle School 17425 Snyder Road Chagrin Falls, OH 44023

All State Insurance P.O. Box 660598 Dallas, TX 75266

American Family Insurance 32100 Solon Road #203 Solon, OH 44139

AT&T Wireless P.O. Box 1391 Southgate, MI 48195

Attorney General of the U.S. U.S. Dept. of Justice Tax Division Civil Trial Section, Northern Reg. P.O. Box 55, Ben Franklin Station Washington, DC 20044

Capital One P.O. Box 30281 Salt Lake City, UT 84130-0281

Capital One Auto Finance P.O. Box 259407 Plano, TX 75025

Chex Systems, Inc. 7805 Hudson Road Suite 100 Saint Paul, MN 55125

Choice Recovery 1550 Old Henderson Road Ste 100 Columbus, OH 43220

Cleveland Municipal Court 1200 Ontario Street Attn: Clerk of Courts -Garnishment Cleveland, OH 44113 Cleveland State University 2121 Euclid Ave. UC 463 Cleveland, OH 44115

Craig W Relman, Esq 23811 Chagrin Blvd, Ste 160 Beachwood, OH 44122

Credit Collection Service P.O. Box 607 Norwood, MA 02062

Cuyahoga County Community College Eastern Campus 4250 Richmond Rd. Beachwood, OH 44122

Enhanced Recovery P.O. Box 57547 Jacksonville, FL 32241

Ferrallgas P.O. Box 1003 Liberty, MO 64069

Ferrell Gas P.O. Box 88086 Chicago, IL 60680

First Credit 4909 Pearl East Circle Suite 200 Boulder, CO 80301

First Credit Corporation P.O. Box 9300 Boulder, CO 80301-9300

First Premier Bank 3820 N. Louise Ave. Sioux Falls, SD 57107-0145 Geauga County Court of Common Pleas 100 Short Court Street Chardon, OH 44024

Geauga County Water Resources 470 Center Road Building 3 Chardon, OH 44024

Geico One Geico Plaza Bethesda, MD 20811-0001

Geuaga County Treasurer 211 Main Street #1 Chardon, OH 44024

Golden Valley Lending 635 East Hwy 20 E Upper Lake, CA 95485

Huntington Bank 7450 Huntington Park Dr. HZ0308 Columbus, OH 43235

Huntington Bank P.O. Box 1558 Dept EA1W888 Columbus, OH 43216

IC Systems Collections P.O. Box 64378 Saint Paul, MN 55164-0378

Illuminating Company P.O. Box 3687 Akron, OH 44309-3638

Internal Revenue Service Insolvency Group 6 1240 East Ninth Street, Room 493 Cleveland, OH 44199 IRS P.O. Box 7346 Philadelphia, PA 19101-7346

Kay Jewelers P.O. Box 4485 Beaverton, OR 97076

Keith D. Weiner & Associates 75 Public Square 4th Floor Cleveland, OH 44113

Medina County Dept. of Job and Fam 232 Northland Drive Medina, OH 44256

Nationwide Insurance One Nationwide Plaza City Columbus, OH 43215

Northstar Location Services, LLC Attn: Financial Services Dept. 4285 Genesee Street Buffalo, NY 14225

Office of the Ohio Attorney General 150 E. Gay St. Columbus, OH 43215-3191

Office of the U.S. Attorney Attn: Bankruptcy Section Carl B. Stokes U.S. Courthouse 801 West Superior Ave., Suite 400 Cleveland, OH 44113

Ohio First Class Credit Union P.O. Box 5877 Cleveland, OH 44101

Plaza Services 110 Hammond Drive Atlanta, GA 30328 PNC 2730 Liberty Ave. Pittsburgh, PA 15222

Pro Model & Talent 3421 Ridgewood Road Akron, OH 44333

Progressive Leasing 256 Data Drive Draper, UT 84020

Public Storage 22800 Miles Road Cleveland, OH 44128

Redrock Financial 24110 Lorain Road North Olmsted, OH 44070

Robert L. Reynolds 19391 St. Clair Avenue Euclid, OH 44117

Sherry Evilsizer 222 Gaylord Road Lodi, OH 44254

Sprint KSOPHT0101-Z4300 6391 Sprint Parkway Overland Park, KS 66251-4300

Sterling Jewelers 375 Ghent Rd. Akron, OH 44333

T-Mobile P.O. Box 742596 Cincinnati, OH 45274-2596

Terminix 17515 Engle Lake Drive Ste A Cleveland, OH 44130 The Metrohealth System P.O. Box 931703 Cleveland, OH 44193

Time Warner Cable P.O. Box 0901 Carol Stream, IL 60132

US Bank P.O. Box 108 Saint Louis, MO 63166

Waste Management P.O. Box 9001797 Louisville, KY 40290-1797

We Fix Money 9435 Lorton Market Street Suite 762 Lorton, VA 22079

Why Not Lease It 4540 Cooper Road Ste 305 Cincinnati, OH 45242